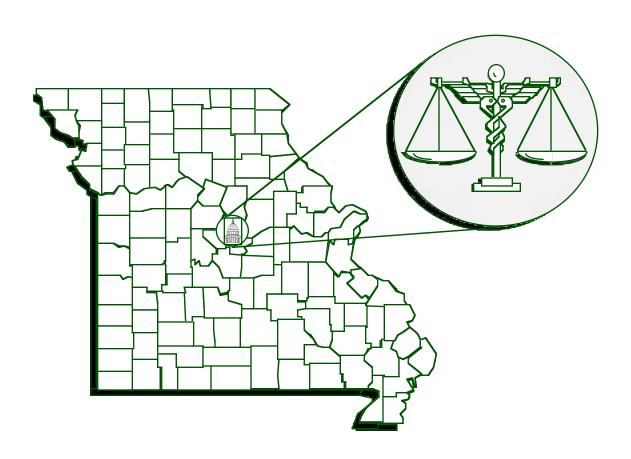
# Missouri Health Facilities Review Committee

# Certificate of Need Meeting Compendium



November 8, 2004

State Capitol Building House Hearing Room 7 Jefferson City, MO



#### Missouri Health Facilities Review Committee

915G Leslie Blvd., Jefferson City, MO 65101

Voice: (573) 751-6403

Fax: (573) 751-7894

H. Bruce Nethington, Chair Catherine L. Davis Milamari A. Cunningham, M.D., Vice-Chair

Dorothy V. Fauntleroy Marion S. Pierson, M.D.

Sen. Mary Groves Bland Sen. Dan Clemens

Rep. Thomas A . Villa Rep. Larry Crawford

#### Memorandum To Missouri Health Facilities Review Committee

Thomas R. Piper, Director From:

Certificate of Need Program

Date: October 19, 2004

Subject: November 8 Certificate of Need and Administrative Meetings

This mailing is sent in preparation for our upcoming Administrative and Certificate of Need meetings on November 8, 2004. Your copies of the applications to be heard at this meeting are also included in this mailing. Additional information we have received has been placed in the appropriate application. Updates may also be provided before the next meeting.

Your Compendium is a regular "Spiegel Version" which includes the latest Certificate of Need Meeting staff analyses and Administrative Meeting materials (depending on which cover of the document you start from). This Compendium will be a helpful aid to you in preparation for and during the meeting.

#### Sunday, November 7, 2004

• 6:00 p.m. Administrative Meeting (dinner will be served)

**CON Conference Room** 

915G Leslie Blvd., Jefferson City (see map on reverse side)

#### Monday, November 8, 2004

• 9:00 a.m. Certificate of Need Meeting

House Hearing Room #7

Capitol Building

12:00 p.m. (cont'd.) Administrative Meeting (time is approximate)

Please contact our office by phone or email to let us know whether or not you are planning to attend the meeting, and if you will need housing on Sunday night.

Feel free to contact us if you have questions regarding the agenda items or any other concerns. We look forward to seeing you at the next meeting.

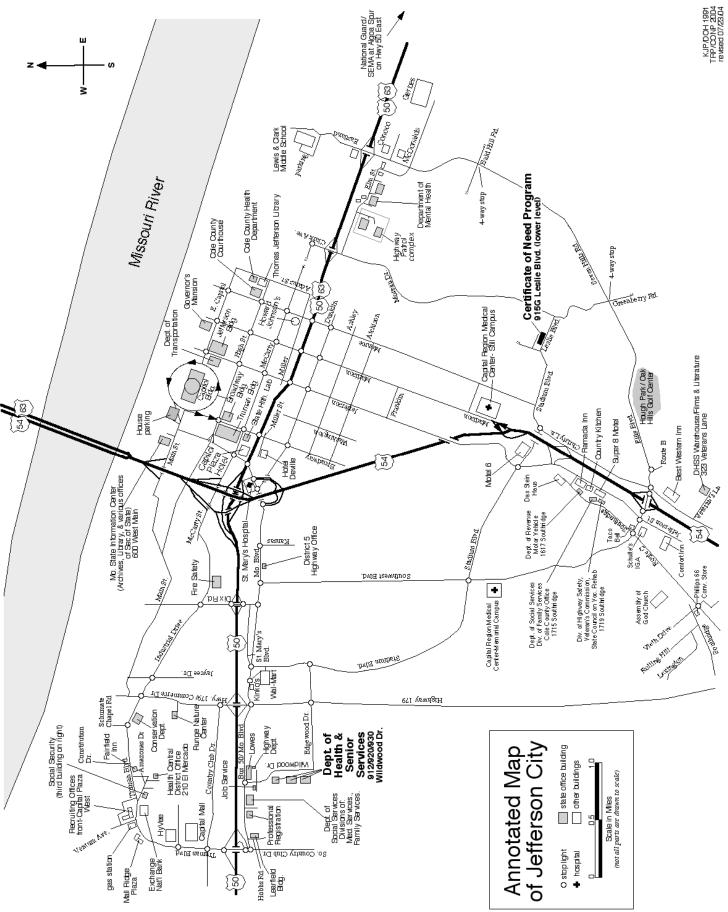
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**Enclosures: Compendium** 

Applications

c: Daryl Hylton

# **CON Program Office Location**



#### Missouri Health Facilities Review Committee

# **Certificate of Need Meeting**

November 8, 2004, 9:00 a.m.

House Hearing Room 7, Capitol Building, Jefferson City

#### **Tentative Agenda**

#### A. Committee Business

- 1. Review and Perfect Agenda
- 2. Present Mission Statement
- 3. Review Registered Representative Log
- 4. Present Meeting Protocol
- 5. Approve Minutes (September 19, 2004, CON and Admin. Meetings)

#### B. Old Business (none)

#### C. New Business: Expedited applications

Filing Date/	Reviewer
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Application Project Number & Name/City & County/Cost & Description

#### D. New Business: Full applications

07/09/04 (DS)	1.	#3642 RS: Cape Retirement Community, Inc. Cape Girardeau (Cape Girardeau County) \$670,600, Modernize facility and add 4 RCF II beds
08/25/04 (DS)	2.	#3672 HS: Lester E. Cox Medical Centers Springfield (Greene County) \$1,300,800, Acquire MRI

08/27/04 3. **#3670 RS:** St. Luke's Care Center
(DS) Carthage (Jasper County)
\$1,200,000, Modernize facility and add 10 RCF II beds

08/27/04
(DS)

4. **#3675 HS:** Skaggs Community Health Center Branson (Taney County)
\$3,624,076, Acquire linear accelerator

08/27/04 5. **#3664 FS:** Cardiovascular Consultants, P.C. Kansas City (Jackson County) \$2,296,357, Acquire PET/CT unit

08/27/04 6. **#3666 HS:** St. Francis Medical Center Cape Girardeau (Cape Girardeau County) \$1,800,000, Replace PET unit

08/27/04 7. **#3676 RS:** Frene Valley Residential Center (DS) Hermann (Gasconade County) \$2,500,000, Establish 30-bed RCF II

08/27/04 8. **#3671 HS:** DMS Imaging, Inc. Liberty (Clay County) \$1,738,980, Replace mobile PET unit

#### E. Other Business

09/28/04
(MH)

1. #3011 NM: Delmar Gardens of St. Charles, Inc.
St. Charles (St. Charles County)
\$19,084,508, Request to change owner/operator

10/08/04
(MH)
2. #3485 HM: Nuclear Imaging Services, LLC
St. Joseph (Buchanan Co.), Clinton (Henry Co.),
Sedalia (Pettis Co.), Excelsior Springs (Clay Co.),
Cameron (Clinton Co.), Richmond (Ray Co.), Jefferson City (Cole Co.)
\$1,450,000, Reissue CON to add Capital Region Medical Center
Jefferson City (Cole County)

<sup>\*</sup> To the left of each project listed on the agenda is a set of initials which depicts the planner assigned to review the project (**MH:** Mike Henry and **DS:** Donna Schuessler). If a date is shown above the initials, it indicates the date on which the application was submitted.

# **Suggested Motions**

#### I. Motions for Action on Applications

A.	Approve as Submitted:	
	I move we certify a need for project# as set forth in the application.	
В.	Approve for Less:	
	I move we certify a need for project# as set forth in the application.  Approve for Less:  I move we certify a need for less than what was originally sought in project # by granting approval for all portions except the which would be reduced from to  Denial:	
C.	Denial:	
	· · · · · · · · · · · · · · · · · · ·	

#### II. Motions to Close Meeting (Closed Session)

- **A.** I move that this meeting be closed, and that all records and votes, to the extent permitted by law, pertaining to and/or resulting from this closed meeting be closed under Section 610.021 (choose one of the following):
  - 1. Subsection (1) RSMo for the purpose of discussing general legal actions, causes of action or litigation, and any confidential or privileged communications between this agency and its attorney.
  - 2. Subsection (3) RSMo for the purpose of discussing hiring, firing, disciplining or promoting an employee of this agency.
  - 3. Subsection (13) RSMo for the purpose of making **performance** ratings pertaining to individual employees.
  - 4. For the purpose of **reviewing and approving the closed minutes of one or more previous meetings** and which authorized this agency to go into closed session during those meetings.
  - 5. Subsection (14) and Section 620.010.14, Subsection (7) RSMo for the purpose of discussing investigative reports and/or complaints and/or audits and/or other information pertaining to a licensee or applicant.
- **B.** I move that this closed meeting be adjourned and that we return to Open Session.

# Missouri Health Facilities Review Committee

# Mission:

To achieve the highest level of health for Missourians through cost containment, reasonable access, and public accountability.

# Goals:

- Review proposed health care services;
- Address community need;
- Manage health costs;
- Promote economic value;
- Negotiate competing interests;
- · Prevent unnecessary duplication; and
- Disseminate health-related information to interested and affected parties.

# Registered Reps for November 8, 2004, Meeting

<u>Project Name</u>	and Description	Name, Title and Organization	Represented	Phone No.	Position Advocated
3642 RS	Cape Retirement Community	Modernize facility and ac	dd 4 RCF II beds		
	BECHTOLD, J. David	Attorney	Husch & Eppenberger, LLC	573-635-9918	Support
	SOLTYS, Frank	Attorney	Husch & Eppenberger, LLC	573-635-9918	3 Support
3672 HS	Lester E. Cox Medical Centers	Acquire MRI			
	BRESHEARS, Betty	VP, Support Svcs.	Lester E. Cox Medical Centers	417-269-8806	Support
	SNIDER, Shawn	Admin Dir, Diag. Imag.	Lester E. Cox Medical Centers	417-269-4072	2 Support
3670 RS	St. Luke's Nursing Center Mode	ernize facility and add 10	RCF II beds		
	JOSLEN, Sue	Administrator	St. Luke's Care Center, Inc.	417-358-9084	Support
	McGUIRE, Larry, CPA	Accountant	Day & McGuire, PC	417-358-4326	Support Support
3675 HS	Skaggs Community Health Ce	nterAcquire linear accele	erator		
	PIERCE, Michael L.	CEO	Skaggs Community Health Center	417-335-7797	' Support
3664 FS	Cardiovascular Consultants, Po	C Acquire PET/CT			
	SWEARINGEN, Mark J.	Attorney	Greensfelder, Hemker & Gale, P.C.	314-516-2638	Support Support
3666 HS	St. Francis Medical Center Rep	olace PET unit			
	MOORE, Chad M.	Attorney	Lashly & Baer, P.C.	314-621-2939	Support
	WATTERS, Richard D.	Attorney	Lashly & Baer, P.C.	314-621-2939	Support
3676 RS	Frene Valley Corporation Esta	blish 30-bed RCF II			
	BECHTOLD, J. David	Attorney	Husch & Eppenberger, LLC	573-761-1116	Support
	LLOYD-HENSON, Cathy	President	Lloyd Healthcare Management System,	573-486-3155	Support
	QUICK, JohnPaul	President	Victorian Manor	573-368-6958	3 Oppose
3671 HS	DMS Imaging, Inc. Replace PE	T unit and add site			
	HOLMBERG, Douglas J.	Regional VP	DMS Imaging, Inc.	605-330-9060	Support Support

# Missouri Health Facilities Review Committee MEETING PROTOCOL

#### **Presenter Information**

- REPRESENTATIVE REGISTRATION FORM
   All presenters must complete and sign a "Representative Registration
   Form" and give the completed form to the Sign-In Coordinator prior
   to speaking. This form is available on a table near the entrance to the
   meeting chamber.
- APPLICANT PRESENTATION OF "KEY POINTS" AND SUMMATION The applicant's presentation should be a "key points summary" **based on the written application and should not exceed 10 minutes** inclusive of all presenters with 5 minutes additional time for summation before the staff wrap-up.
- WRITTEN APPLICATION REMINDER
   Applicants are reminded that **no new material** beyond the written applications is to be introduced, and no materials or additional papers are to be distributed at the meeting.
- AFFECTED PARTIES PRESENTATIONS
  All "affected parties" presentations are limited to 3 minutes per person, **up to a maximum per project** of 90 minutes collectively for supporting,
  20 minutes for neutral, and 90 minutes for opposing presentations.
- APPLICANT SUMMATION
  The summation is intended to recap the key points made by the applicant.
  Rebuttals of "affected parties" presentations by applicants are generally discouraged and will not normally be entertained from the floor.

#### **General Information**

- RESERVED AREA
   Reserved Area is to be used by the applicant and supporters during the applicant's presentation only and then vacated for the next group.
- PRESENTATION AREA Individuals waiting to present shall remain clear of the presentation area until specifically called by name or upon "open call" by the chairman.
- TIME MONITOR
  Prescribed time limits will be monitored by the Time Keeper. Presenters shall observe the Time Keeper's indications of lapsed time to ensure each presenter has an opportunity to present within the allotted time.

# **MHFRC Meeting Format**

# Missouri Health Facilities Review Committee

# **MEETING FORMAT**

Time	Function	Activities and Condition
10 minutes	Staff Presentation	Presentation of staff analysis concentrating on need, financial feasibility, special needs, and cost effectiveness.
As needed	Committee Questions	Staff responds to Committee questions.
10 minutes	Applicant Presentation	Presentation of application concentrating on need, financial feasibility, special needs, and cost effectiveness. No introduction of new material and no distribution of additional papers.
As needed	Committee Questions	Applicant responds to Committee questions.
3 minutes per person	Presentations by affected parties <b>supporting</b> the project.	Individual presenters provide <i>supportive</i> information relevant to need, special needs, financial feasibility, cost effectiveness and how the proposal affects presenter.
		(One spokesman per group preferred.)
As needed	Committee Questions	Affected parties respond to Committee questions.
3 minutes per person	Presentations by affected parties <b>neutral</b> to the project.	Individual presenters provide information relevant to need, special needs, and cost effectiveness.
As needed	Committee Questions	Affected parties respond to Committee questions.
3 minutes per person	Presentations by affected parties <b>opposing</b> the project.	Individual presenters provide <i>alternative</i> 5 minutes information relevant to need, special needs, financial feasibility, cost effectiveness and how the proposal affects presenter.
As needed	Committee Overstions	(One spokesman per group preferred.)
	Committee Questions	Affected parties respond to Committee questions.
5 minutes	Applicant Rebuttal	Clarification of issues and key points.
5 minutes	Staff Summary	Summary of key points and recommendations.
As needed	Committee	Discuss and decide to: <ul> <li>Approve based on information in application;</li> <li>Conditionally approve application as modified;</li> <li>Deny based on finding of no need; or</li> <li>Defer to the next meeting.</li> </ul>

max. 90 min. max. 20 min. max. 90 min.

# Missouri Health Facilities Review Committee Certificate of Need Meeting

September 13, 2004, 9:00 a.m.

# House Hearing Room #7, Capitol Building, Jefferson City

(Audio tapes of proceedings are available for review at the Certificate of Need Program Office, Jefferson City.)

### **Minutes**

Presiding: H. Bruce Nethington, Chair

Members Present: Senator Mary Groves Bland

Representative Larry Crawford

Cathy Davis

Dorothy Fauntleroy Dr. Marion Pierson

Representative Thomas Villa

Members Absent: Dr. Milamari Cunningham, Vice-Chair

Senator Dan Clemens

Program Staff: Thomas R. Piper, Director

Donna Schuessler

Mike Henry

Committee Counsel: Bill Vanderpool

Chair Nethington called the meeting to order at 9:10 a.m. Committee members Senator Bland, Ms. Davis, and Dr. Pierson were not able to attend the meeting in person; therefore, they participated by telephone conference call.

# **Committee Business**

# Review and Perfect Agenda

There were no changes to the agenda, and it was adopted as presented by voice vote.

#### Mission Statement

Chair Nethington read the Committee's Mission Statement.

# Review of the Registered Representatives Log

Mr. Piper presented the Registered Representative Log which listed individuals who had registered either in support of, as neutral, or in opposition to, projects on the agenda. This listing enabled Committee members to identify persons who were associated with each project.

# **Meeting Protocol**

Mr. Piper presented the Meeting Protocol to the audience. He requested that anyone who planned to speak should identify themselves; and, if they had not already completed a Representative Registration form, to make sure one was filled out and given to the CONP staff. He continued by explaining the time allotments for each speaker.

#### Minutes of the July 19, 2004, CON and Administrative Meetings

MOTION: A motion was made by Representative Villa, seconded by Ms. Davis, to approve the minutes of the July 19, 2004, CON and Administrative meetings. A voice vote was taken and the motion passed.

# Old Business (None)

# New Business (expedited applications-None)

# **New Business (full applications)**

#3648 HS: St. John's Mercy Medical Center St. Louis (St. Louis County) \$1,490,343, Replace MRI

Testimony was given in support of the project.

MOTION: A motion was made by Ms. Fauntleroy, seconded by Ms. Davis, to approve project

#3648 HS. A roll call vote was taken:

Fauntleroy Yes
Davis Yes
Villa Yes
Pierson Yes

Crawford Not Available Bland Not Available

The motion passed unanimously, and the project was approved.

#3640 NS: Dallas County Care Center Buffalo (Dallas County) \$0, Add 9 SNF beds

Testimony was given in support of the project.

MOTION: A motion was made by Ms. Fauntleroy, seconded by Dr. Pierson, to approve project

#3640 NS. A roll call vote was taken:

Pierson Yes
Bland Yes
Villa Yes
Fauntleroy Yes
Davis Yes

Crawford Not Available

The motion passed unanimously, and the project was approved.

#3649 HS: North Kansas City Hospital North Kansas City (Clay County) \$1,090,350, Acquire linear accelerator

Testimony was given in support of the project.

MOTION: A motion was made by Ms. Davis, seconded by Representative Villa, to approve

project #3649 HS. A roll call vote was taken:

Davis Yes
Bland Yes
Fauntleroy Yes

Dr. Pierson Not Available

Villa Yes Crawford Yes

The motion passed unanimously, and the project was approved.

#3629 HS: Barnes-Jewish St. Peters Hospital St. Peters (St. Charles County) \$2,996,180, Acquire linear accelerator

Testimony was given in support of the project.

MOTION: A motion was made by Dr. Pierson, seconded by Representative Villa, to approve project #3639 HS in the amount of \$2.870,180. A roll call vote was taken:

Villa Yes

Bland Not Available

Davis Yes
Crawford Yes
Pierson Yes
Fauntleroy Yes

The motion passed unanimously, and the project was approved.

#### Other Business

3485 HM: Nuclear Imaging Services, LLC
St. Joseph (Buchanan Co.), Clinton (Henry Co.), Sedalia (Pettis Co.),
Excelsior Springs (Clay Co.), Cameron (Clinton Co.), and Richmond (Ray Co.)
\$1,450,000, Reissue CON to add St. Mary's Health Center, Jefferson City (Cole County)

MOTION: A motion was made by Dr. Pierson, seconded by Ms. Fauntleroy, to approve the reissuance of the CON for project #3485 HM. A roll call vote was taken:

Fauntleroy Yes
Crawford Yes
Davis Yes
Villa Yes
Pierson Yes

The motion passed unanimously, and the project was approved.

As there was no further business, the meeting adjourned at approximately 9:45 a.m.

I, H. Bruce Nethington, Chair, Missouri Health Facilities Review Committee, certify that the Committee has on this day, November 8, 2004, reviewed and approved these minutes of the September 13, 2004, Certificate of Need Meeting.

H. Bruce Nethington, Chair November 8, 2004

Date

# Missouri Health Facilities Review Committee **Administrative Meetina**

September 13, 2004, 9:50 a.m.

House Hearing Room #7, Capitol Building, Jefferson City

(Audio tapes of proceedings are available for review at the Certificate of Need Program Office, Jefferson City.)

#### **Minutes**

Presiding: H. Bruce Nethington, Chair

Members Present: Senator Mary Groves Bland

Representative Larry Crawford

Cathy Davis

**Dorothy Fauntleroy** Dr. Marion Pierson

Representative Thomas Villa

Members Absent: Dr. Milamari Cunningham, Vice-Chair

Senator Dan Clemens

Program Staff: Thomas R. Piper, Director

Donna Schuessler

Mike Henry

Committee Counsel: Bill Vanderpool

Chair Nethington called the meeting to order at 9:50 a.m.

# **Opening Topics**

# Perfection of Agenda

Mr. Piper stated that there were no changes to the agenda.

MOTION: A motion was made by Ms. Davis, seconded by Ms. Fauntleroy, to adopt the agenda.

A voice vote was taken and the motion carried.

# **Legal Counsel Report**

Bill Vanderpool provided a report on litigation.

# **Regular Activities**

# Report of Non-Applicability Letters Issued

MOTION: A motion was made by Ms. Davis, seconded by Ms. Fauntleroy, to confirm the

Non-Applicability CON letters signed by the Chair from June 23, 2004, through

August 17, 2004. A roll call vote was taken:

Villa Yes
Pierson Yes
Davis Yes
Fauntleroy Yes
Crawford Yes

Bland Not Available

The motion carried and the non-applicability letters were confirmed.

#### **Expedited Review Decisions**

Mr. Piper reviewed the expedited review decisions for August 24, 2004, and September 23, 2004.

#### **Tentative Agendas**

Mr. Piper reviewed the November 8, 2004, tentative CON meeting agenda.

Mr. Piper stated that a request had been submitted by Sherry Brockmeier that the review cycle be shortened on project #3686 RS: Parkview Residential Care (replace 10 RCF I beds) so that their request could be placed on the October 25 expedited ballot.

MOTION: A motion was made by Ms. Fauntleroy, seconded by Representative Crawford, to approve the request. A roll call vote was taken:

Villa Yes
Pierson Yes
Davis Yes
Fauntleroy Yes
Crawford Yes

Bland Not Available

The motion carried, and the request would be placed on the October 25 ballot.

# **MHFRC Meeting Calendar**

The proposed 2005 meeting calendar was provided in the Compendium. The Committee members were asked to review the calendar and discuss at the next meeting.

# Specific Management Issues

#### Rules and the Future

Mr. Piper brought the Committee members up-to-date on the proposed rules.

MOTION: A motion was made by Ms. Davis, seconded by Ms. Fauntleroy, to withdraw proposed amendments to 19 CSR 60-50.420 and 19 CSR 60-50.450. A roll call vote was taken:

Crawford Yes
Pierson Yes
Davis Yes
Villa Yes
Fauntleroy Yes

Bland Not Available

The motion carried.

Mr. Piper referenced a letter from Dr. Cunningham to the Committee requesting that discussion concerning the next steps relating to the Rules be delayed to the next meeting. The Committee concurred with her request.

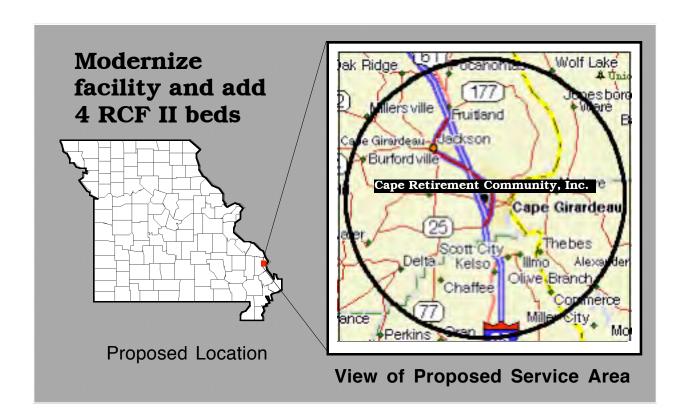
# October 4 Legislative Workshop

Due to scheduling conflicts, the Legislative Workshop was moved to the evening of November 7, 2004, at the CONP Office.

As there was no further business, the meeting was adjourned at approximately 10:35 a.m.

I, H. Bruce Nethington, Chair, Missouri Health Facili	ties Review Committee, certify that the
Committee has on this day, November 8, 2004, review	wed and approved these minutes of the
September 13, 2004, Administrative Meeting.	
	November 8, 2004
H. Bruce Nethington, Chair	Date

# NO OLD BUSINESS



**Applicant:** Cape Retirement Community, Inc. (owner/operator)

Contact Person: J. David Bechtold, 573-635-9118

**Project Address:** 3120 Independence

Cape Girardeau 63703 (Cape Girardeau County)

**Cost:** \$670,600

**Appl. Rec'd:** July 9, 2004

**100 Days Ends:** October 17, 2004 (30-Day Extension: November 16, 2004)

**Summary:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)...... Documented

• Proposal Description...... 19 CSR 60-50.430(4)...... Documented

• Community Need......19 CSR 60-50.450.....**Not Documented** 

• Financial Feasibility...... 19 CSR 60-50.470(1-4)...... Documented

#### **APPLICATION SUMMARY:**

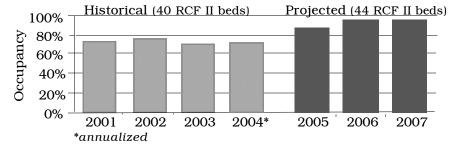
The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative forms for the Contact Person and one other individual were complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

- 1. The applicant proposes to modernize Cape Retirement Community, Inc. (dba Chateau Girardeau), a 60-bed skilled nursing facility (SNF) and a 40-bed residential care facility (RCF) II. The project includes increasing the number of RCF II beds from 40 to 44 pursuant to \$197.305(10)(e), the 10-bed/10% provision, and relocating 12 RCF II beds to a separate building located on the campus currently being used as independent living apartments. The RCF II portion of the building would become part of the existing facility license.
- 2. The applicant provided a map showing the location of the proposed facility, along with a site plan and schematic drawings. The applicant also documented that the drawings had been submitted to the Department of Health and Senior Services for review. A General Warranty Deed was provided to document ownership.
- 3. The applicant indicates that the facility would primarily serve residents who live in the independent living apartments who require the RCF level of care. The applicant worked with CONP staff in advance and provided the year 2005 population data estimated by the Bureau of Health Data Analysis for those zip codes which are included in, or overlapped by, the 15-mile radius. The applicant and staff agree that the CON-approved population estimation methodology yielded an adjusted population of 11,963 aged 65+.
- 4. According to the applicant, the specific problem this project is designed to meet is that, contractually, as a provider of continuing care services, they are required to provide access to long term care services for their residents; as the occupancy of the independent living apartments continues to increase, there will be an increased demand for long term care services; and several of their semi-private rooms are being used as private rooms.
- 5. The applicant's historical and projected "licensed" bed occupancies are shown below:



It should be noted that "licensed" bed occupancy does not reflect the beds which were not "available" for occupancy as reported in the Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds (see attached).

- 6. The applicant stated that consumer needs and preferences were addressed as a result of a survey of the current residents and their families. This project addresses the primary concerns expressed by the participants.
- 7. To date, no letters of support or opposition have been received.

#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

A need for additional beds according to the Criteria and Standards for "Long-Term Care" was not documented.

1. For additional long-term care beds, the population-based need formula [Unmet Need =  $(S \times P) - U$ ] applies as follows:

S = Service-specific need rate of 16 beds per 1,000 population aged 65+ where:

P = Year 2005 population age 65+ in the 15-mile radius

U = Number of RCF beds (existing & approved) in the 15-mile radius

Unmet need =  $(0.016 \times 11,963) - 632 = 441$  bed surplus;

2. The Committee's practice has been to consider the occupancy of all other long-term care beds of the same licensure category in the proposed service area. The utilization (licensed and available beds) for all other long-term care providers within the 15-mile radius of the proposed site has been assessed for the preceding six consecutive calendar quarters. According to the Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds (see attached) for the fourth quarter of 2002 through the first quarter of 2004 (see attached), the average occupancy of all facilities within the 15-mile radius was declining at 80.2%, 79.1%, 78.0%, 78.1%, 79.4% and 74.5%, respectively.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Renovation: \$450,000 (\$44.88 per square foot) 52,000 (A&E/consultant/legal fees Fees: Equipment: 44.000 Value of building & land 124,600

\$670,600

The applicant's proposed new construction cost of \$44.88 per square foot is 42% lower than the 2004 RS Means Cost Data 3/4 percentile of \$77.55 for outstate Missouri for RCF renovation.

- 2. Financing for the project would be provided through unrestricted funds. The applicant provided a copy of their latest audited financial statement to document that funds are available.
- 3. The applicant's financial projections indicate that the project would be financially feasible.
- 4. The applicant's estimated daily charges for 2005 through 2007 are \$93, \$96 and \$99, respectively.

5. The applicant stated that their mission is to provide housing, healthcare and an environment which ministers not only to the physical needs of their residents, but also the needs of the whole person. Over the past three years, the facility has provided over \$800,000 in charity care. The facility also provides wellness and educational programs in both the facility and the Cape Girardeau community.

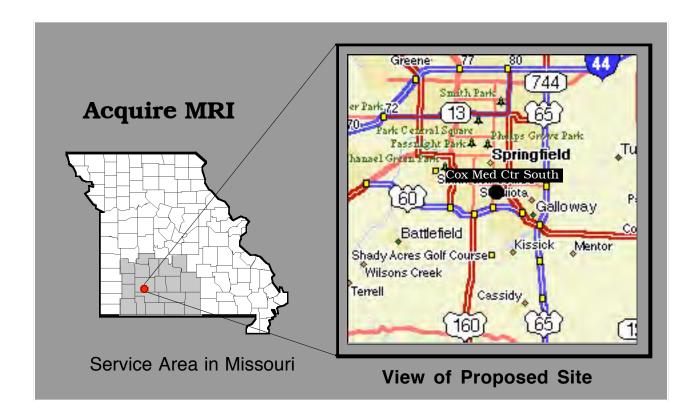
#### **ADDITIONAL INFORMATION:**

A minimal amount of additional information was requested, and the applicant's response is included in the application.

# Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds

						5000000					= =									I	
Type ID	County	Facility Name (if bold, no response	) Address	City	Zip	CN App	Licensed RCF II F				r '02 Pat Days Occup** %		03 Pat Days Occup*** %		r '03 Pat Days Occup**** %				'03 Pat Days Occup***** %		<u>'04 Pat Days</u> Occup****** %
R 016 19892	Cape Girardeau	Auburn Creek-Asstd Lvng by Americare	2910 Beaver Creek Drive	Cape Girardeau	63701	0	46	0	46	5,796	3,595 62.0%	5,670	3,239 57.1%	5,733	2,925 51.0%	5,796	3,562 61.5%	5,796	4,630 79.9%	3,822	3,121 81.7%
R 016 23989	Cape Girardeau	Capetown Assisted Living (lic 1/8/04)	2857 Cape Lacroix Road	Cape Girardeau	63701	0	0	21	21							1				1,911	140 7.3%
R 016 01386	Cape Girardeau	Chateau Girardeau Assisted Living	3120 Independence St	Cape Girardeau	63703	0	40	0	40	3,036	2,785 91.7%	2,880	2,591 90.0%	2,939	2,599 88.4%	2,944	2,575 87.5%	2,944	2,489 84.5%	2,926	2,788 95.3%
R 016 05130	Cape Girardeau	Country Gardens RCF II	210 Franks Lane	Cape Girardeau	63701	0	56	0	56	4,968	4,784 96.3%	5,040	4,770 94.6%	4,914	4,550 92.6%	4,968	4,324 87.0%	4,968	4,049 81.5%	4,914	4,368 88.9%
R 016 12751	Cape Girardeau	Fountainbleau Lodge	2001 N Kingshighway	Cape Girardeau	63701	0	60	0	60	5,106	4,202 82.3%	5,009	4,499 89.8%	5,036	4,813 95.6%	5,041	4,702 93.3%	5,004	4,758 95.1%	4,966	4,403 88.7%
R 016 02662	Cape Girardeau	Frederick St Manor	429 N Frederick	Cape Girardeau	63701	0	32	0	32	2,944	2,852 96.9%	2,880	2,700 93.8%	2,912	2,612 89.7%	2,944	2,514 85.4%	2,944	2,237 76.0%	2,912	2,129 73.1%
R 016 11208	Cape Girardeau	Frederick St Manor II	435 N Frederick	Cape Girardeau	63701	0	0	7	7	644	368 57.1%	630	90 14.3%	637	0 0.0%	644	0 0.0%	644	0 0.0%	637	0 0.0%
R 016 03865	Cape Girardeau	Jackson Residential Care	316 E Adams St	Jackson	63755	0	0	19	19	1,748	1,059 60.6%	1,710	1,040 60.8%	1,729	1,178 68.1%	1,748	1,104 63.2%	1,748	1,073 61.4%	1,729	1,015 58.7%
R 016 05445	Cape Girardeau	Jefferson Manor	902 Jefferson Avenue	Cape Girardeau	63701	0	0	10	10	920	920 100.0%	900	900 100.0%	910	910100.0%	920	920100.0%	920	920 100.0%	910	910 100.0%
R 016 16163	Cape Girardeau	Louis E. Masterman Center	341 N. Main St	Cape Girardeau	63701	0	18	0	18	1,656	1,080 65.2%	1,620	1,075 66.4%	1,638	1,355 82.7%	1,656	1,191 71.9%	1,656	955 57.7%	1,638	825 50.4%
R 016 13536	Cape Girardeau	Lutheran Home Resid Care II	2825 Bloomfield Rd	Cape Girardeau	63703	0	105	0	105	9,660	9,243 95.7%	9,450	9,189 97.2%	9,555	9,281 97.1%	9,660	9,259 95.8%	9,660	8,975 92.9%	9,555	8,746 91.5%
R 016 03628	Cape Girardeau	Maple Crest Manor	430 N Frederick	Cape Girardeau	63701	0	48	0	48	4,416	3,036 68.8%	4,320	2,790 64.6%	4,368	2,581 59.1%	4,416	2,284 51.7%	4,416	2,666 60.4%	4,368	2,773 63.5%
R 016 14454	Cape Girardeau	Monticello House (The)	1115 K-land Drive, PO Box 740	Jackson	63755	0	62	0	62	5,060	3,680 72.7%	4,950	3,479 70.3%	5,005	3,256 65.1%	5,060	4,041 79.9%	5,060	4,151 82.0%	5,642	3,289 58.3%
R 016 06291	Cape Girardeau	Parkwood Manor	325 N Sprigg St	Cape Girardeau	63701	0	30	0	30	2,760	2,023 73.3%	2,700	1,865 69.1%	2,730	1,950 71.4%	2,760	1,886 68.3%	2,760	1,930 69.9%	2,730	2,002 73.3%
R 016 17420	Cape Girardeau	Sprigg St Manor	701 N Sprigg St	Cape Girardeau	63701	0	0	15	15	1,380	552 40.0%	1,350	540 40.0%	1,365	546 40.0%	1,380	507 36.7%	1,380	460 33.3%	1,365	364 26.7%
Subtotals	for Cape Gi	rardeau Num	ber of Units in Subtotal:15			0	497	72	569	50,094	40,179 <b>80.2%</b>	49,109	38,767 <b>78.9</b> %	49,471	38,556 77.9%	49,937	38,869 77.8%	49,900	39,293 78.7%	50,025	36,873 <b>73.7</b> %
UR 3421	Scott	Chaffee RCF I	537 West Yoakum	Chaffee	63740	43												1		}	
R 100 07039	Scott	Sunshine Villa	2520 James	Scott City	63780	0	20	0	20	1,840	1,472 80.0%	1,800	1,499 83.3%	1,820	1,456 80.0%	1,840	1,564 85.0%	1,840	1,812 98.5%	1,820	1,728 94.9%
Subtotals	for Scott	Num	ber of Units in Subtotal2			43	20	0	20	1,840	1,472 80.0%	1,800	1,499 83.3%	1,820	1,456 80.0%	1,840	1,564 85.0%	1,840	1,812 <b>98.5%</b>	1,820	1,728 94.9%
GRAI	ND TOTALS	FOR MISSOURI:	Number in State: 17			43	517	72	589	51,934	80.2% 41,651	50,909	40,266 79.1%	51,29	1 78.0% 40,012	51,777	40,433 78.1%	51,740	79.4% 41,105	51,845	38,601 74.5%

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**Applicant:** Lester E. Cox Medical Centers (owner/operator)

**Contact Person:** Betty S. Breshears, 417-269-8806

**Location:** 3901 S. Fremont Avenue

Springfield 65804 (Greene County)

**Cost:** \$1,300,800

**Appl. Rec'd:** August 25, 2004

**100 Days Ends:** December 3, 2004 (30-Day Extension: January 2, 2005)

**Summary:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)...... Documented

• Proposal Description ......19 CSR 60-50.430(4) .................Documented

• Community Need ......19 CSR 60-50.440(1) ......Documented

• Financial Feasibility ......19 CSR 60-50.470(1-4) ...... Documented

#### **APPLICATION SUMMARY:**

The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative forms for the Contact Person and one other party were complete.
- 3. The Proposed Project Budget was complete.

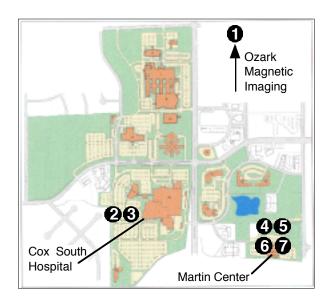
#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

1. The applicant proposes to **acquire a seventh magnetic resonance imaging (MRI) unit.** The proposed unit would be a GE 1.5 Tesla, Excite, Vector 400 MRI to be located in the Martin Center on the Cox South campus. The applicant currently has two MRI units on their Cox South Hospital, one at Ozarks Magnetic Imaging (OMI), and three at the Martin Center (see list and map below). The schedule below compares Cox's current MRI service configuration to the new capacity they are proposing to achieve:

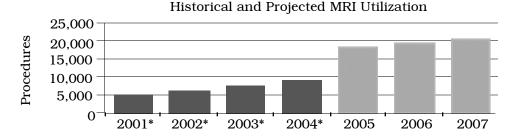
<u>Location</u>	CON Date	<u>Operational</u>	<b>Proposed</b>
1. OMI	08/07/91 (#1788 HS)	09/01/02	Trade-in*
2. Hospital	12/31/99 (#2897 FS)	05/01/00	Maintain
3. Hospital (mobile)	(below thresholds)	04/01/02	Release
4. Martin Center	06/03/02 (#3225 HS)	07/01/04	Maintain
5. Martin Center	06/03/02 (#3225 HS)	07/01/04	Maintain
6. Martin Center	(below thresholds)	07/01/04	Maintain
7. Martin Center	Proposed (#3672 HS)	01/01/05	New

<sup>\*</sup> potential sale by Seimens to St. John's Health System in Springfield



The applicant stated that OMI, a joint venture between Lester E. Cox Medical Center and St. John's Regional Medical Center formed in 1991, was recently dissolved. As a result, the applicant is proposing to consolidate the majority of their MRI outpatient services at the Cox South Hospital campus.

- 2. An itemized listing of the proposed equipment was included with the bid quotes. The applicant provided documentation that plans had been submitted to the Department of Health and Senior Services.
- 3. According to the applicant, the specific problems this proposal is designed to address include the following:
  - Six- to ten-day backlog for outpatient appointments;
  - The outpatient overflow at the Martin Center goes back to the main hospital;
  - In 2002, a mobile MRI was temporarily leased (below CON thresholds) to decrease the backlog; however, demand has increased to the point where the mobile unit is still being used, but it costs approximately \$2,000 per month more than the proposed new MRI unit would cost; and
  - Scheduling has been expanded to 16 hours per day with some outpatient appointments on the weekend.
- 4. The applicant provided historical and projected utilization measured in procedures, as shown on the graph below:



\*Historical utilization figures are only for the unit(s) on the Cox South campus. If the utilization at the OMI site were to be included, utilization for 2001 through 2004 would be an additional 7421, 8570, 8625, and 8531 scans, respectively, provided by their three MRI units there.

The applicant stated that the total MRI utilization, including Cox South and the Cox portion of OMI, increased 201% between 2000 and 2004. This is a result of greater clinical acceptance of the technology and an increase in the types of uses.

- 5. The applicant stated this proposal was presented to and approved by the members of the Board of Directors of Cox Health System. This is a 37-member group of community representatives who provide guidance and oversight from the community's perspective.
- 6. The application included seven letters of support, all from physicians. No opposition has been expressed.

#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

The need according to the Criteria and Standards for "Equipment and New Hospitals" was documented.

- 1. For additional units or services in the geographic service area, the population-based need formula does not apply.
- 2. For additional units, the optimum utilization standard of 3,000 procedures per unit applies. As shown on the chart above, the utilization of the applicant's two existing MRIs has exceeded the standard of 6,000 procedures for two units. Since the other three units at the Martin Center began operation in July 2004, their utilization is not available.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Major Medical Equipment: \$1,250,000 (bid quote provided)
Shielding: 50,800

Total: \$1,300,800

- 2. The applicant stated that the project would be funded through unrestricted funds. A copy of the consolidated balance sheets was provided to document that adequate funds are available for the project.
- 3. Based on the applicant's financial projections, this project would be financially feasible.
- 4. Historical average patient charges per procedure for 2002 through 2004 were \$986 and \$1107, and \$1186, respectively. Estimated average charges per procedure for 2005 through 2007 are \$1221, \$1258, and \$1296, respectively. Charges were estimated by using a 3% annual increase.
- 5. The applicant stated that, as a not-for-profit hospital, it is responsive to the needs of the medically indigent. Lester E. Cox Medical Centers has created several funds to help patients with financial support, including the Children's Miracle Network and the Good Samaritan Fund. No one would be turned away for lack of personal financial means to pay for services.

#### **ADDITIONAL INFORMATION:**

Additional information was requested during the review process. The applicant's response is included in the application.



**Applicants:** St. Luke's Nursing Center (owner)

St. Luke's Care Center (operator)

Contact Person: Sue Joslen, 417-358-9084

**Project Address:** 1220 E. Fairview

Carthage 64836 (Jasper County)

**Cost:** \$1,200,000

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004, 2004 (30-Day Extension: January 4, 2005)

**Summary:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)...... Documented

• Proposal Description...... 19 CSR 60-50.430(4)...... Documented

• Community Need....... 19 CSR 60-50.450..... **Not Documented** 

#### **APPLICATION SUMMARY:**

The application summary was complete.

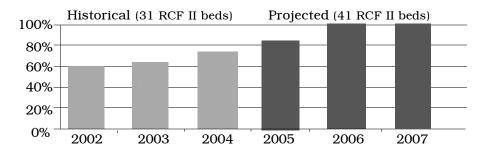
- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative forms for the Contact Person and one other individual were complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

- 1. The applicants propose to modernize St. Luke's Care Center, a 31-bed residential care facility (RCF) II and 155-bed skilled nursing facility (SNF). A 60-bed SNF wing with semi-private rooms would be converted to RCF space with private rooms. The applicant would decrease their 155 SNF beds to 95.
  - Nine existing RCF beds would be relocated to the 12,203 square feet of renovated space. The space where the 9 RCF II beds are currently located would be converted from semi-private to private rooms. The applicant is also requesting 10 additional RCF II beds, which would be located in the proposed additional RCF space. This would increase the number of RCF II beds to 41. In addition to converting the SNF space to RCF, this proposal also includes construction of a new 1,600 square foot dining area, plus other minor renovations.
- 2. The applicants provided a map showing the location of the facility, along with a site plan and schematic drawings. The applicant also documented that the drawings had been submitted to the Department of Health and Senior Services for review. A General Warranty Deed was provided to document ownership.
- 3. The applicants indicated that the facility would primarily serve residents who live in Carthage and the surrounding area. The applicants worked with CONP staff in advance and provided the year 2005 population data estimated by the Bureau of Health Data Analysis for those zip codes which are included in, or overlapped by, the 15-mile radius. The applicants and staff agree that the CON-approved population estimation methodology yielded an adjusted population of 14,728. aged 65+.
- 4. According to the applicants, the specific problems this project is designed to meet include the following:
  - Provide RCF services in an apartment-like setting resulting in a greater sense of independence for the residents;
  - Expanding RCF space would allow the facility to utilize all of their licensed beds and provide space for the individuals on their waiting list;
  - The applicant would be able to respond to residents and their families who desire private rooms; and
  - The reduction of SNF beds would remove beds from the service area inventory which are not being highly-utilized.

5. The applicants' historical and projected "licensed" bed occupancies are shown below:



It should be noted that "licensed" bed occupancy does not reflect the beds which were not "available" for occupancy as reported in the Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds (see attached).

- 6. The applicants stated that consumer needs and preferences were addressed through satisfaction surveys and resident council meetings. The community was made aware of the project through newspaper articles and radio announcements. Information about the project was also provided at various civic meetings.
- 7. To date, six letters of support were included in the application: one from the Carthage Chamber of Commerce, one from a healthcare facility, one from a healthcare professional, two from state legislators, and one from the community. No opposition have been received.

#### COMMUNITY NEED CRITERIA AND STANDARDS:

A need for additional beds according to the Criteria and Standards for "Long-Term Care" was **not documented.** 

1. For additional long-term care beds, the population-based need formula [Unmet Need = (S x P) – U] applies as follows:

where:

S = Service-specific need rate of 16 beds per 1,000 population aged 65+

P = Year 2005 population age 65+ in the 15-mile radius

U = Number of RCF beds (existing & approved) in the 15-mile radius

Unmet need =  $(0.016 \times 14,728) - 607 = 371$  bed surplus

2. The Committee's practice has been to consider the occupancy of all other long-term care beds of the same licensure category in the proposed service area. The utilization (licensed and available beds) for all other long-term care providers within the 15-mile radius of the proposed site has been assessed for the preceding six consecutive calendar quarters. According to the Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds (see attached) for the fourth quarter of 2002 through the first quarter of 2004 (see attached), the average occupancy of all facilities within the 15-mile radius was 71.2%, 72.7%, 71.3%, 70.5%, 78.0% and 77.8%, respectively.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Construction: \$160,000 (\$44.88 per square foot)

Renovation: 821,398

Fees: 93,529 (A&E/consultant/legal fees

 Equipment:
 102,073

 Int. during construction:
 23,000

 TOTAL
 \$1,200,000

The applicants' proposed construction cost of \$100.00 per square foot is 10% lower than the 2004 RS Means Cost Data 3/4 percentile of \$110.78 for outstate Missouri for RCF construction.

The applicants' renovation cost of \$67.31 per square foot is 13% lower than the 2004 RS Means Cost Data 3/4 percentile of \$77.55 for outstate Missouri for RCF renovation.

- 2. Financing for the project would be provided through a loan from UMB Bank at 80% of the prime interest rate to be backed up by an industrial revenue bond to be issued by the county.
- 3. The applicants' financial projections indicate that the project would be financially feasible.
- 4. The applicants' historical daily charge for 2002 through 2004 was \$47, \$48, and \$52, respectively. The estimated daily charges for 2005 through 2008 are \$52, \$57, \$58, and \$58, respectively.
- 5. The applicants stated that their mission statement directs them to be very responsive to the needs of all individuals. Since the facility opened in 1988, no resident has been turned away due to lack of funds.

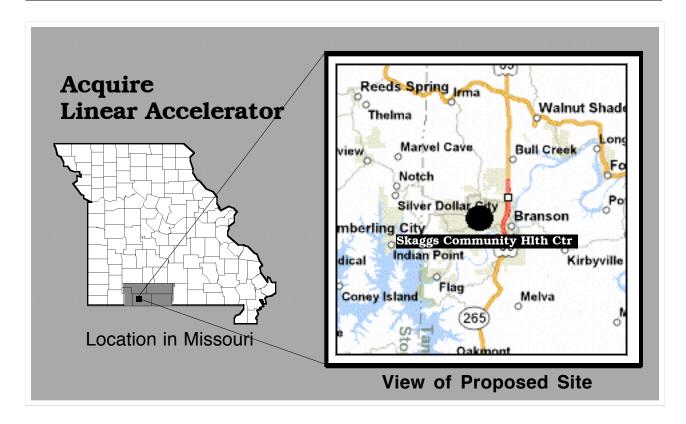
#### ADDITIONAL INFORMATION:

A minimal amount of additional information was requested, and the applicant's response is included in the application.

### Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds

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Type ID County	Facility Name (if bold, no response)	Address	City	Zip	CN App	License RCF II	d RCF B			r '02 Pat Days Occup** %				'03 Pat Days Occup**** %		03 Pat Days Occup***** %		r '03 Pat Days Occup***** %		'04 Pat Days Occup****** %
R 050 20779 Jasper	Autum Place Res Care of Joplin	2030 Zora Ave	Joplin	64801	0	0	38	38	3,496	2,575 73.7%	3,420	2,684 78.5%	3,458	2,616 75.7%	3,496	2,574 73.6%	3,496	2,876 82.3%	3,458	2,674 77.3%
R 049 20858 Jasper	Bristol Manor of Carthage	2131 S River Ave	Carthage	64836	0	0	12	12	1,104	973 88.1%	1,080	800 74.1%	1,092	953 87.3%	1,104	909 82.3%	1,104	998 90.4%	1,092	1,050 96.2%
R 049 20537 Jasper	Bristol Manor of Webb City	1803 North Main, Highway D	Webb City	64870	0	12	0	12	1,104	782 70.8%	1,080	771 71.4%	1,092	793 72.6%	1,104	720 65.2%	1,104	1,074 97.3%	1,092	1,032 94.5%
R 049 19907 Jasper	Carl Junction Guest House	302 South Cowgill	Carl Junction	64834	0	18	0	18	1,656	1,406 84.9%	1,620	1,310 80.9%	1,494	959 64.2%	360	220 61.1%	1,008	902 89.5%	1,638	1,479 90.3%
R 049 20550 Jasper	Carl Junction Residential Care	201 Fir Road	Carl Junction	64834	0	37	0	37	3,404	2,699 79.3%	3,330	2,633 79.1%	3,367	2,648 78.6%	3,404	2,633 77.4%	3,404	2,497 73.4%	3,367	2,447 72.7%
R 049 01545 Jasper	Cline's RCF	514 South Pearl	Joplin	64801	0	0	12	12	1,104	1,104 100.0%	1,080	1,026 95.0%	1,092	961 88.0%	1,104	846 76.6%	1,104	1,028 93.1%	1,092	876 80.2%
R 049 21346 Jasper	Country Acres	1169 Prairie Flower Rd	Webb City	64870	0	0	12	12	1,104	570 51.6%	1,080	613 56.8%	1,092	788 72.2%	1,104	736 66.7%	1,104	798 72.3%	1,092	728 66.7%
R 049 02206 Jasper	Drake Residential Care Fac. (temp clsd)	406 Howard	Carthage	64836	0	80	0	80	7,360	3,463 47.1%	7,200	3,764 52.3%	7,280	3,870 53.2%	7,360	3,479 47.3%	0	0 0.0%	0	0 0.0%
R 049 03294 Jasper	Guest House	4250 E 13th St	Joplin	64801	0	27	0	27	2,484	2,119 85.3%	2,430	2,281 93.9%	2,457	1,894 77.1%	2,484	2,069 83.3%	2,484	1,959 78.9%	2,457	2,126 86.5%
R 049 18548 Jasper	Guest House II	4248 E 13th St	Joplin	64801	0	12	0	12	1,104	1,053 95.4%	1,080	1,068 98.9%	1,092	987 90.4%	1,104	1,034 93.7%	1,104	1,095 99.2%	1,092	1,001 91.7%
R 049 03709 Jasper	Guest House III	1402 Rex	Joplin	64801	0	20	0	20	1,748	1,494 85.5%	1,710	1,376 80.5%	1,820	1,259 69.2%	1,840	1,535 83.4%	1,748	1,679 96.1%	1,729	1,594 92.2%
R 049 17660 Jasper	Maple Tree TerrAsstd Lvng by Americare	2510 Clinton St	Carthage	64836	0	37	0	37	2,158	2,004 92.9%	2,159	2,110 97.7%	2,261	2,217 98.1%	2,323	2,314 99.6%	2,326	2,283 98.2%	2,163	2,114 97.7%
AR 3604 Jasper	Maple Tree TerrAsstd Lvng by Americare	2510 Clinton St	Carthage	64836	13												į		1	!
R 049 04871 Jasper	Maplewood	215 North Main	Jasper	64755	0	0	26	26	2,208	1,012 45.8%	2,160	1,035 47.9%	2,184	1,001 45.8%	2,392	736 30.8%	2,392	1,012 42.3%	1,638	728 44.4%
R 049 14251 Jasper	Spring River Christian Vill Inc	201 S Northpark Ln	Joplin	64801	0	93	0	93	8,556	5,388 63.0%	8,370	5,121 61.2%	8,463	5,400 63.8%	8,556	5,453 63.7%	8,556	5,388 63.0%	8,463	5,134 60.7%
R 049 07606 Jasper	St Luke's RCF	1220 E Fairview	Carthage	64836	0	31	0	31	2,852	1,648 57.8%	2,790	1,548 55.5%	2,821	1,789 63.4%	2,852	1,927 67.6%	2,852	1,911 67.0%	2,821	1,857 65.8%
R 049 13351 Jasper	Sunnyhills RCF	17562 Imperial Road	Carthage	64836	0	0	18	18	1,656	1,308 79.0%	1,620	1,210 74.7%	1,638	1,251 76.4%	1,656	1,337 80.7%	1,656	1,442 87.1%	1,638	1,383 84.4%
R 049 09477 Jasper	Timberidge Living Center	4904 E Wellridge Ln	Joplin	64801	0	42	0	42	3,864	2,779 71.9%	3,780	2,878 76.1%	3,822	2,544 66.6%	3,864	2,566 66.4%	3,864	2,779 71.9%	3,822	2,809 73.5%
Subtotals for Jasper	Number	of Units in Subtotal:18			13	409	118	527	46,962	32,377 <b>68.9%</b>	45,989	32,228 70.1%	46,525	31,930 68.6%	46,107	31,088 67.4%	39,306	29,721 <b>75.6%</b>	38,654	29,032 75.1%
R 073 13636 Newton	Ozark Center RCF II	3405 S. Schifferdecker Ave.	Joplin	64804	0	30	0	30	2,520	2,239 88.8%	2,700	2,677 99.1%	2,730	2,615 95.8%	2,760	2,725 98.7%	2,760	2,714 98.3%	2,730	2,716 99.5%
R 073 20541 Newton	Silver Creek-Astd Lvng by Americare	3325 Texas Ave	Joplin	64804	0	0	37	37	2,300	2,263 98.4%	2,174	2,074 95.4%	2,184	2,120 97.1%	2,151	2,141 99.5%	2,208	2,118 95.9%	2,176	2,141 98.4%
Subtotals for Newton	Number	of Units in Subtotal2			0	30	37	67	4,820	4,502 <b>93.4%</b>	4,874	4,751 <b>97.5</b> %	4,914	4,735 <b>96.4</b> %	4,911	4,866 99.1%	4,968	4,832 <b>97.3%</b>	4,906	4,857 <b>99.0%</b>
GRAND TOTAL	S FOR MISSOURI:	Number in State: 20			13	439	155	594	51,782	71.2% 36,879	50,863	36,979 72.7%	51,439	71.3% 36,665	51,018	35,954 70.5%	44,274	78.0% 34,553	43,560	33,889 77.8%

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**Applicant:** Skaggs Community Health Center (owner/operator)

**Contact Person:** Michael L. Pierce, 417-335-7797

**Location:** 545 N. Business Hwy. 65

Branson 65616 (Taney County)

**Cost:** \$3,624,076

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004 (30-Day Extension: January 4, 2005)

**Summary:** Based on the following Certificate of Need Rules:

• Application Summary...... 19 CSR 60-50.430(3)...... Documented

• Proposal Description ......19 CSR 60-50.430(4) .................Documented

• Community Need ......19 CSR 60-50.440(2) ................Documented

#### **APPLICATION SUMMARY:**

The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative form for the Contact Person was complete.
- 3. The Proposed Project Budget was complete.

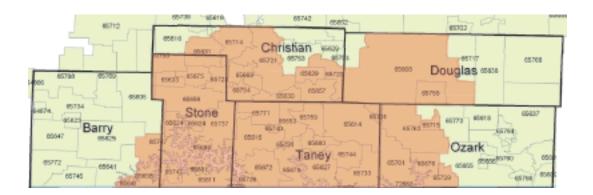
#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

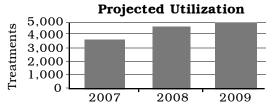
- 1. The applicant proposes to **acquire a linear accelerator**. The new unit would be a Varian Medical Systems Clinac 21EX Linear Accelerator with Millennium Multi-Leaf Collimeter. It would include intensity modulated radiation therapy (IMRT). The applicant also proposes to acquire a Siemens Medical Solutions, Inc., computed tomography (CT) scanner for simulation.
- 2. As part of their strategic planning process, Skaggs Community Health Center identified five cornerstones which focus on providing health care within their service area: emergency services, womens' services, rehabilitation, cardiac care, and cancer care.

The applicant proposes to consolidate and expand their cancer treatment services into a synergistic cancer center on their campus. They currently provide cancer care in the areas of outpatient infusion and chemotherapy, inpatient medical oncology, surgical oncology, and oncology imaging. The hospital has expanded their oncology imaging services with the addition of an 8-slice CT scanner, longer hours for MRI services, and the recent addition of a mobile PET/CT. The proposed linear accelerator would be an integral component of their radiation therapy program.

3. The applicant identified their primary service area as Stone and Taney Counties, and portions of Christian, Douglas, Barry and Ozark Counties (see map below). The Center for Health Information Management and Evaluation (CHIME) shows a 2005 projected population of 99,516. The applicant also provided a 2008 projected population of 103,550 from the Hospital Industry Data Institute (HIDI).



- 4. According to the applicant, the specific problems this proposal is designed to address include the following:
  - Residents in the service area must travel approximately 50 miles, each way, for their daily radiation therapy treatments;
  - Incomplete comprehensive cancer care services were identified during the strategic planning process;
  - Treatment options in the service area are limited; and
  - Recruitment of medical staff is hampered because of limited cancer care services.
- 5. The applicant provided projected utilization measured in treatments, as shown on the graph below:



The applicant stated that utilization projections were based on historical incident rates for cancer in the service area. For 2004, it is projected to be 947. The applicant made the assumption that 50% of these cases would qualify for radiation therapy. They then calculated that number against the portion of each county in the service area likely to utilize the hospital for cancer services.

- 6. The applicant stated that the hospital has a Board of Trustees made up of various business, activist, and social backgrounds which represents the community. As part of their strategic planning process, the medical staff was also surveyed. A copy of a notice published in the *Branson Tri-Lakes Daily News* was provided to document that the community was made aware of the project and given an opportunity to comment on it.
- 7. Ten letters of support were included in the application: five from businesses, one from the community, three from healthcare professionals, and one from a state legislator (Representative Dennis Wood).

#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

The applicant documented a need according to the "Equipment and New Hospitals" Criteria and Standards.

1. For new units or services in the geographic service area, the population-based need formula [Unmet Need =  $(\mathbf{R} \times \mathbf{P}) - \mathbf{U}$ ] applies as follows:

where: R = Service-specific need rate of one linear accelerator per 100,000 population

P = Year 2005 population in the service area

U = Number of linear accelerators in the service area

Unmet need =  $(0.00001 \times 99.516) - 0 = 1.0$  unit needed;

When the population-based need formula using the HIDI 2008 population projection of 103,550 is applied to the service area, there is an unmet need for 1 unit.

- 2. The minimum utilization standard of 3,500 radiation therapies per unit does not apply because there are no other linear accelerators in the service area.
- 3. The Criteria and Standards for Evolving Technology do not apply.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Major Medical Equipment: \$2,702,500 (Bid quotes provided)
New Construction: \$96,576 (Vaults [lin. acc. & CT])

Other: 25,000 (Interest during construction)

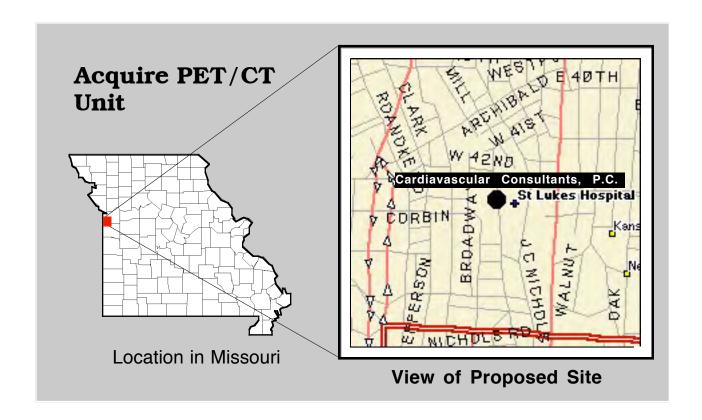
TOTAL: \$3,624,076

- 2. The applicant stated that the project could be funded through unrestricted funds. A copy of the latest audited consolidated balance sheets were provided to document that funds are available. In addition, the Skaggs Community Health Center Foundation has been formed to seek donations for the development of projects such as the cancer center.
- 3. Financial projections indicate that the project would be financially feasible.
- 4. The estimated average charge per treatment for 2007 through 2009 is projected to be \$680, \$697, and \$718, respectively. When the projected charges in this proposal are compared to the projected charges for the two proposals approved at the last meeting, the applicant's charges range from 24% to 42% lower. The applicant stated that projected charges were based on existing radiation therapy programs in Southwest Missouri.
- 5. The applicant stated that, as part of their mission, Skaggs Community Health Center will continue to provide care to patients who are in financial need. In fiscal year 2003-2004, the applicant provided over \$2 million in charity care and almost \$13 million in bad debt write-offs.

#### ADDITIONAL INFORMATION:

A minimal amount of additional information was requested. A copy of that information is in the application included in the Compendium mailing.

# #3664 FS: Cardiovascular Consultants, P.C.



**Applicant:** Cardiovascular Consultants, P.C. (owner/operator)

Contact Person: Mark J. Swearingen, 314-516-2638

**Location:** 4330 Wornall Road, Suite 2200

Kansas City 64111 (Jackson County)

**Cost:** \$2,296,357

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004 (30-Day Extension: January 4, 2005)

**Summary:** Based on the following Certificate of Need Rules:

• Financial Feasibility ......19 CSR 60-50.470(1-4) ................Documented

# #3664 FS: Cardiovascular Consultants, P.C.

#### APPLICATION SUMMARY:

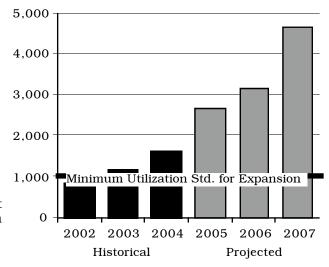
The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative form for the Contact Person was complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

- 1. The applicant proposes to **acquire a Siemens Biograph 16 Positron Emission Tomography and Computed Tomography (PET/CT) unit.** This additional unit would be located in existing space occupied by Cardiovascular Consultants, P.C., in a medical office building on the campus of Saint Luke's Hospital of Kansas City, where the existing PET unit, which was acquired in 2002, is located.
- 2. An itemized listing of the proposed equipment was included with the bid quotes.
- 3. According to the applicant, the specific problems this project is designed to meet are as follows:
  - The existing PET unit is expected to achieve its maximum utilization in 2004;
  - The proposed PET/CT unit would allow patients who currently undergo SPECT procedures to transition to PET/CT which has improved diagnostic accuracy; and
  - The state-of-the-art PET/CT technology would improve quality of care.
- 4. The applicant provided the historical and projected utilization measured in PET scans, as shown on the graphon the right. The assumptions used to generate the projections for years 2005 to 2007 anticipate that the number of scans would increase 61.5%, 19.0% and 48.0% per year, respectively.
- 5. The applicant indicated that consumer needs are continually assessed through patient and physician input.
- 6. To date, one letter of support from Saint Luke's Hospital of Kansas City had been submitted. No opposition to this project has been expressed.



#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

A need according to the Criteria and Standards for "Equipment and New Hospitals" was documented.

1. For additional units or services in the geographic service area, the population-based need formula does not apply.

## #3664 FS: Cardiovascular Consultants, P.C.

2. For additional units, the optimum utilization standard of 1,000 PET scans per unit applies. Information provided by the applicant indicates that utilization for 2004 will exceed 1,600 procedures. The applicant's existing unit has dramatically exceeded the standard by more than 600 procedures this past year.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Equipment: \$2,296,357 (Bid quotes provided)

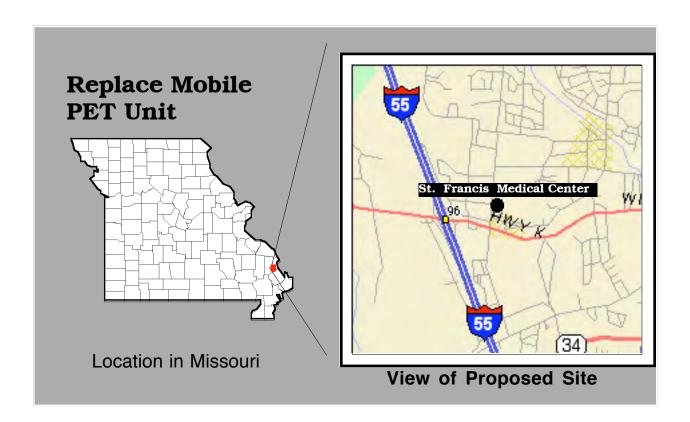
All of the proposed costs were documented.

- 2. The application included a copy of a letter from De Lage Landen, the financing arm for Siemens Medical Systems, indicating their willingness to work with the applicant to finance the project.
- 3. The applicant's financial projections indicate that the project would be financially feasible.
- 4. The applicant's average patient charges per PET scan for 2002 through 2004 were \$2822, \$2681 and \$2955, respectively. Projected charges for 2005 through 2007 would be \$2889, \$2872 and \$2842, respectively. They compare favorably with the projected charges in other recent applications.
- 5. The applicant indicates that it is responsive to the medically indigent by providing charity care as necessary. In addition, Medicaid and Medicare are accepted.

#### ADDITIONAL INFORMATION:

A moderate amount of additional information was requested and provided by the applicant. That information is included with the application.

# #3666 HS: Saint Francis Medical Center



**Applicants:** Alliance Imaging, Inc. (owner)

Saint Francis Medical Center (operator)

Contact Person: Richard D. Watters, 314-621-2939

**Project Address:** 211 Saint Francis Drive

Cape Girardeau 63703 (Cape Girardeau County)

**Cost:** \$1,800,000

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004 (30-Day Extension: January 4, 2005)

**Conclusions:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)....... Documented

• Proposal Description...... 19 CSR 60-50.430(4)...... Documented

• Community Need........... 19 CSR 60-50.440(3)...... Documented

• Financial Feasibility...... 19 CSR 60-50.470 (1-4)....Documented

# #3666 HS: Saint Francis Medical Center

#### **APPLICATION SUMMARY:**

The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative forms for the Contact Person and one other party were complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete.

- 1. The applicants propose **to replace a mobile positron emission tomography** (**PET**) **unit.** The existing Siemens unit was acquired by Alliance Imaging in 2001 for use in other states. On March 28, 2003, a non-applicability letter #3463 HA was issued to allow the unit to serve Saint Francis Medical Center. The service began on May 2, 2003. The replacement unit would be a Siemens Biograph, which would include integrated computed tomography (CT). The PET/CT service would be available at Saint Francis Medical Center one day per week, which would be the same as the current PET service.
- 2. The applicants provided an itemized listing of medical equipment to be acquired.
- 3. The applicants provided a bid quote from Siemens Medical Solutions.

#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

The need according to the Criteria and Standards for Equipment and New Hospitals was documented.

- 1. The applicants stated the primary financial rationale for the new unit is that the mobile provider is upgrading to a PET/CT to serve the Illinois hospitals on the current route, and the current unit would be removed from service. Approval of the proposed unit is needed to maintain service at Saint Francis Medical Center.
- 2. The current American Hospital Association "useful life guideline" is five years; the existing three-year old unit has not exceeded its useful life, but its technology has been exceeded by the proposed PET/CT unit which would provide superior diagnostic capabilities.
- 3. Quality of care would be improved by more comprehensive diagnosis of head, neck, abdomen, pelvis, esophagus, mediastinum and breast cancers. The more accurate images enhance treatment and followup.
- 4. The existing unit does not require an unusual amount of maintenance.
- 5. The existing unit is not leased; it is owned by Alliance Imaging. The current service agreement would be amended to reflect the proposed replacement.
- 6. Technological advances include greater accuracy, improved tumor location, reduced scan times, and faster reading times for radiologists.
- 7. Patient satisfaction would improve because of faster scan times, improved diagnoses and eliminating the need for a separate CT scan.
- 8. Patient outcomes would be improved because the more accurate images would improve therapy planning and treatment.

# #3666 HS: Saint Francis Medical Center

- 9. PET utilization is expected to increase 19% per year from 152 scans in FY 2004 to 255 scans in FY 2007.
- 10. Additional capabilities include faster scan times, more accurate images and faster read times for radiologists.
- 11. The applicants stated that patient charges would not be increased due to the actual replacement, but would increase as a result of the hospital's overall charge increases through their annual budget process.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

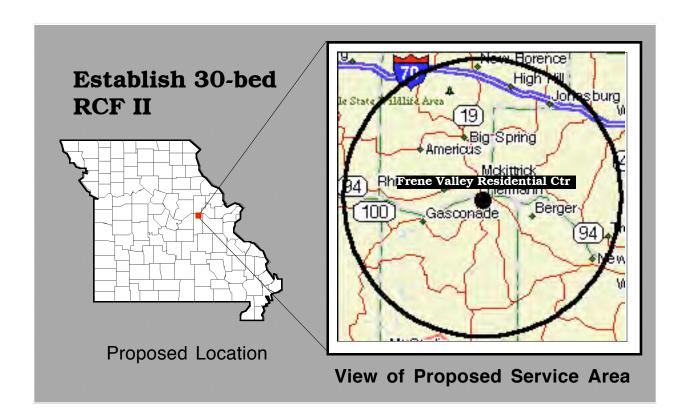
Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Equipment: \$1,800,000 Bid Quote Provided

- 2. Alliance Imaging has already purchased the proposed equipment to serve the Illinois sites on the route.
- 3. Financial projections indicate that the project would be financially feasible.
- 4. Historical average patient charges per procedure for FY 2002 through FY 2004 were \$3244, \$3796, and \$4525, respectively. The estimated projected average charges per procedure for 2005 through 2008 are \$5000, \$5300 and \$5618, respectively. The proposed charges appear to be high when compared to other applications such as the two Kansas City area proposals on this same agenda. The applicants stated that charges were based on market conditions, input from the vendor, relationship to Medicare reimbursement principles and actual costs of the service.
- 5. The application included a copy of Saint Francis Medical Center's Patient Assistance Program policies for providing care to the medically indigent.

# #3676 RS: Frene Valley Residential Center



**Applicants:** Frene Valley Corporation (owner)

Lloyd Healthcare Management Systems, Inc. (operator)

**Contact Person:** J. David Bechtold, 573-761-1116

**Project Address:** 1800 Wein Street

Hermann 65041 (Gasconade County)

**Cost:** \$2,500,000

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004, 2004 (30-Day Extension: January 4, 2005)

**Summary:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)...... Documented

• Proposal Description...... 19 CSR 60-50.430(4)......Not Documented

• Financial Feasibility...... 19 CSR 60-50.470(1-4)...... Documented

# #3676 RS: Frene Valley Residential Center

#### APPLICATION SUMMARY:

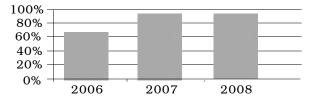
The application summary was complete.

- 1. The Applicant Identification and Certification form was complete.
- 2. The Registered Representative forms for the Contact Person and one other individual were complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete, and community awareness and support was documented.

- 1. The applicants propose to **establish a 30-bed residential care facility (RCF) II**. The new 16,864 square foot building would be a two-story structure. The first level would be the RCF II. The second level would be independent living apartments.
- 2. The applicants provided a map showing the location of the proposed facility, along with a site plan and schematic drawings. The address provided in the application is **questionable** and does not appear to be the correct for the proposed RCF. The address is for the skilled nursing facility. The applicants also documented that the drawings had been submitted to the Department of Health and Senior Services for review. Ownership of the project site has **not fully documented**.
- 3. The applicants indicated that the facility would primarily serve residents who live in Hermann and the surrounding area. The applicants worked with CONP staff in advance and provided the year 2005 population data estimated by the Bureau of Health Data Analysis for those zip codes which are included in, or overlapped by, the 15-mile radius. The applicants and staff agree that the CON-approved population estimation methodology yielded an adjusted population of 3,707 aged 65+.
- 4. According to the applicants, the specific problem this project is designed to meet is to provide the seniors in the Hermann area a place to age which keeps them close to families and cultural environments with which they are most familiar.
- 5. The applicants' projected utilization is shown below:



The applicants provided a description of the methods and assumptions used to project utilization.

6. The applicants stated that consumer needs and preferences were addressed through the letters of support from the Mayor and the Board of Aldermen. To date, three letters of support from the community were included in the application. A resolution from the Mayor of Hermann and the Board of Aldermen expressing support was also included in the application. Opposition relating to the proposal has been received.

# #3676 RS: Frene Valley Residential Center

#### **COMMUNITY NEED CRITERIA AND STANDARDS:**

A need for additional beds according to the Criteria and Standards for "Long-Term Care" was **not documented.** 

1. For additional long-term care beds, the population-based need formula [Unmet Need = (S x P) – U] applies as follows:

where: S = Service-specific need rate of 16 beds per 1,000 population aged 65+

P = Year 2005 population age 65+ in the 15-mile radius

U = Number of RCF beds (existing & approved) in the 15-mile radius

Unmet need =  $(0.016 \times 3,707) - 79 = 20$  bed surplus

(Although not part of the June 21 inventory of long-term care beds, this calculation does include the RCF beds in a non-applicability Certificate of Need letter dated September 22, 2004, which was issued for a new 48-bed RCF I in Hermann.)

2. The Committee's practice has been to consider the occupancy of all other long-term care beds of the same licensure category in the proposed service area. The utilization (licensed and available beds) for all other long-term care providers within the 15-mile radius of the proposed site has been assessed for the preceding six consecutive calendar quarters. According to the Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds for the fourth quarter of 2002 through the first quarter of 2004 (see attached), the average occupancy of all facilities within the 15-mile radius was **53.1%**, **55.7%**, **53.2%**, **54.8%**, **52.5%** and **49.0%**, respectively.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Construction: \$1,538,840 (\$44.88 per square foot)

Acquisition of land: 301,840

Fees: 252,150 (A&E/consultant/legal fees

 Equipment:
 150,000

 Int. during construction:
 257,170

 TOTAL
 \$2,500,000

The applicants' proposed new construction cost of \$91.25 per square foot is 18% lower than the 2004 RS Means Cost Data 3/4 percentile of \$110.78 for outstate Missouri for RCF renovation.

- 2. Financing for the project would be provided through a loan from US Bank in Washington, MO, at an interest rate within 1.25% of the prime rate. A letter was provided by the bank documenting their willingness to finance the project.
- The applicants' financial projections indicate that the project would be financially feasible.
- 4. The applicants' estimated daily charges for 2006 through 2008 are \$99, \$102 and \$105, respectively.
- 5. The applicants stated that the needs of the medically indigent would be addressed through cash grant and other state and federal programs.

#### ADDITIONAL INFORMATION:

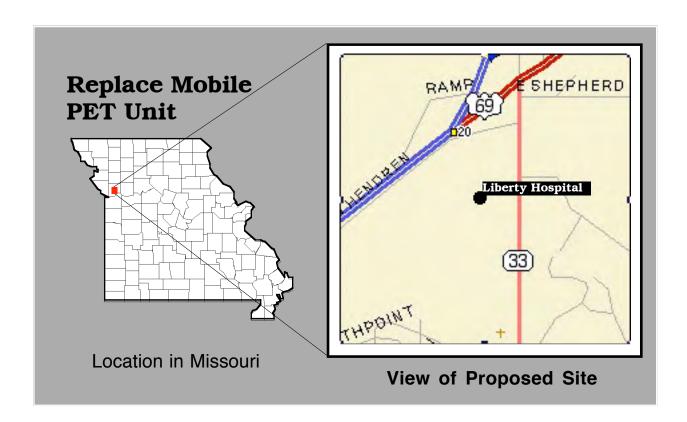
A moderate amount of additional information was requested, and the applicant's response is included in the application.

## Six-Quarter Occupancy of Residential Care Facility Licensed and Available Beds

Type ID County	Facility Name (if bold, no response)	Address	City	Zip		Licensed RCF II R		ds* 4th Q otal Avail.	tr '02 Pat Days Occup** %	1st Qtr Avail.	'03 Pat Days Occup*** %	2nd Qtr Avail.	'03 Pat Days Occup**** %	3rd Qtr Avail.	'03 Pat Days Occup***** %	4 <u>th Qtr</u> Avail.	'03 Pat Days Occup***** %	1st Qtr '0 Avail. O	I4 Pat Days Occup****** %
R 036 19080 Franklin R 036 05738 Franklin	Arizona Care Center New Haven Care Center	101 Arizona Street 9503 Highway 100	New Haven New Haven	63068 63068	0	0 16	15 0	15 1,012 16 1,472	981 96.9% 337 22.9%						1,012100.0% 348 23.6%				866 86.5% 339 23.3%
GRAND TOTAL	S FOR MISSOURI:	Number in State: 2			0	16	15	2,484 31	53.1% 1,318	2,700	1,505 55.7%	2,457	53.2% 1,306	2,484	1,360 54.8%	2,484	52.5% 1,303	2,457	1,205 49.0%

page 1

# **#3671 HS:** *DMS Imaging, Inc.*



**Applicants:** DMS Imaging, Inc. (owner)

Liberty Hospital (operator)

Capital Region Medical Center (Operator) (Recommend Removal)

Contact Person: Douglas J. Holmberg, 605-330-9060

**Project Address:** 2525 Glenn Hendren Drive

Liberty 64068-9625 (Clay County)

1125 Madison St.

Jefferson City 65101 (Cole County) (Recommend Removal)

**Cost:** \$1,738,980

**Appl. Rec'd:** August 27, 2004

**100 Days Ends:** December 5, 2004 (30-Day Extension: January 4, 2005)

**Conclusions:** Based on the following Certificate of Need Rules:

• Application Summary..... 19 CSR 60-50.430(3)...... Documented

• Proposal Description...... 19 CSR 60-50.430(4)...... Documented

• Community Need...... 19 CSR 60-50.440(3)...... Documented

• Financial Feasibility...... 19 CSR 60-50.470 (1-4).... Documented

# **#3671 HS:** *DMS Imaging, Inc.*

#### **APPLICATION SUMMARY:**

The application summary was complete.

- 1. The Applicant Identification and Certification form was complete. However, since the application was filed, the applicants determined that Capital Region Medical Center should be removed. A corrected Applicant Identification and Certification form has been submitted to reflect the desired change.
- 2. The Registered Representative form for the Contact Person was complete.
- 3. The Proposed Project Budget form was complete.

#### PROPOSAL DESCRIPTION:

The detailed project description was complete.

- 1. The applicants propose **to replace a mobile Positron Emission Tomography (PET) unit.** The original application also included the addition of Capital Region Medical Center; however, the request to add that site has been withdrawn. The existing Siemens unit has been in service at Liberty Hospital since April 2003. It was acquired via a non-applicability letter #3478 HA. The replacement unit would be a Siemens Biograph PET/CT. The service would continue to be available at Liberty Hospital one day per week. This mobile route would also serve facilities in Kansas.
- 2. The applicants provided an itemized listing of medical equipment to be acquired.
- 3. The applicants provided a bid quote from Siemens Medical Solutions.

#### COMMUNITY NEED CRITERIA AND STANDARDS:

The need according to the Criteria and Standards for Equipment and New Hospitals was documented.

- 1. The applicants stated the primary financial rationale for the new unit is that the improved technology would provide more accurate diagnostic procedures which lead to better patient management, and ultimately less cost to the patient.
- 2. The current American Hospital Association "useful life guideline" is five years; the existing four-year old unit has not exceeded its useful life; but, its technology has been surpassed by the proposed PET/CT unit which would provide superior diagnostic capabilities.
- 3. Quality of care would be improved by more accurate diagnosis, better localization and treatment of primary and metastatic cancer, and it would result in fewer surgeries and invasive procedures.
- 4. The existing unit does not require an unusual amount of maintenance.
- 5. The existing unit is not leased; it is owned by DMS Imaging, and it would be relocated to sites outside of Missouri.
- 6. Technological advances include the overlaying of PET and CT which generates images that diagnose the disease and localize the site of the disease. Also, the proposed unit would result in faster scan times.
- 7. Patient satisfaction would improve because of faster scan times, improved diagnoses, and avoidance of unnecessary surgeries and invasive procedures.

# **#3671 HS:** *DMS Imaging, Inc.*

- 8. Patient outcomes would be improved because the more accurate images would improve therapy planning and treatment.
- 9. With faster scan times, the proposed unit would have the capacity to serve more patients. Liberty Hospital expects their utilization to increase approximately 10% per year.
- 10. Additional capabilities include faster scan times, more accurate images and faster read times for radiologists.
- 11. Liberty Hospital indicates that average patient charges are expected to remain at \$3250 for 2004 through 2006.

#### FINANCIAL FEASIBILITY CRITERIA AND STANDARDS:

Financial feasibility of the project was documented.

1. The Proposed Project Budget shows the following costs:

Equipment: \$1,738,980 Bid Quote Provided

- 2. Information from the annual report of DMS Imaging's parent company document that adequate unrestricted funds are available for the project.
- 3. Financial projections indicate that the project would be financially feasible.
- 4. The application included information from Liberty Hospital regarding their policies for providing care to the medically indigent.

### E. OTHER BUSINESS

Item #1
#3011 NM: Delmar Gardens of St. Charles County, Inc.
St. Charles (St. Charles County)
\$19,084,508, Reissue CON to Change Owner and Operator

Contact Person: Gabe Grossberg, 314-862-0045

On July 31, 2000, a Certificate of Need (CON) was issued to Delmar Gardens of St. Charles County, Inc., as the owner/operator, for a new 120-bed skilled nursing facility to be located at the intersection of Twin Chimneys Drive and Route N, St. Charles County 63366. This proposal was a replacement of a facility formerly known as Ellisville Health Care Center. The original project cost was \$10,800,000.

On January 30, 2001, the applicant received a six-month extension in order to incur capital expenditures on the project through above-ground construction.

On August 2, 2001, a Periodic Progress Report (PPR) was received documenting that above-ground construction had occurred. Subsequent PPRs have been received on a timely basis.

On February 27, 2003, a request for approval of a cost overrun in the amount of \$8,284,508 was received. The applicant also submitted the required additional application fee. On March 31, 2003, the cost overrun was approved.

On September 28, 2004, a request was received asking that the CON be reissued to change the owner and the operator. The current request is that the owner should be Delmar Gardens of O'Fallon Real Estate, Inc., and the operator should be Delmar Gardens of O'Fallon, L.L.C.

A copy of the request and the additional information to reflect the proposed changes follows this summary. These are Missouri registered corporations which are eligible to assume these roles without any other restrictions we are aware of.

MH: October 5, 2004 E.1: page 1 of 1

# CERTIFICATE OF NEED PROGRAM

Husch & Eppenberger, LLC

SEP 2 8 2004 RECEIVED 285 Seef High Street P.O. Box 1261 Jeffesson, Massoull 65102-1263 623-635-9118 Fox 878-684-7884 , www.husch.com

J. David Bechtold
Or Counsel

September 28, 2004

HAND DELIVERY

Mr. Thomas R. Piper Director, Certificate of Need Program 915G Leslie Boulevard P. O. Box 570 Jefferson City, MO 65102

Re\*

Delmar Gardens of St. Charles, Inc.

Project 3011 NS

Request for Name Change

Dear Mr. Piper:

By this letter and attached documents I am requesting that pursuant to § 197.315.6, RSMo 2000, the certificate of need issued to Delmar Gardens of St. Charles, Inc. be reissued to show the owner as Delmar Gardens of O'Fallon Real Estate, Inc. and the operator to be Delmar Gardens of O'Fallon, L.L.C.

In support of this application I am attaching as Exhibit I a copy of the Certificate of Amendment for Delmar Gardens of O'Fallon, Inc. together with a copy of the Amendment of the Articles of Incorporation showing that Delmar Gardens of O'Fallon Real Estate, Inc. is the same corporation as Delmar Gardens of St. Charles, Inc.

Attached as Exhibit 2 is a copy of the Certificate of Organization for Delmar Gardens of O'Fallon, L.L.C.

I would request that this matter be placed before the Missouri Health Facilities Review Committee at its November 8, 2004 meeting. Thank you for your attention in this regard.

Very truly yours,

(Of Counsel

JDB:lkp Enclosures

cc:

Gail Hartman (w/enclosures)

SE LÓUIS - BOWNTOWN SE LÓUIS - KANSAS CITY - JEFFÉRSÓM CITY - SPÁINGÉIELD - FEORIA CHAIRANOOGA - GÓWNIOWN MEMPRIS - EAST MEMBRIS - NASHVILLE





# Certificate of Need Program

# OCT 0 6 2004

# APPLICANT IDENTIFICATION AND CERTIFICATION

(must metch the Letter of Intent for this project, without exception)											
1. Project Location tellech additionel pages as necessary to identify multiple project sites.											
Tide of Proposed Propers  Delimar Gardens of St. Charles											
Twin Chimneys Drive at Route N O'Fellen Mo. St. Charles											
2. Applicant Identii	TCACION #Nomedon roust agree with previo	наў знатіпо	Lener of Inverse								
List All Owner(s): ### corporate analy: Address (Street/City/State/Zip Code) Telephone Numb											
Delmar Gardens of O'Fallon Real Estate Inc.	101South Hanley St. Louis Mo. 63105			314-862-0045							
List All Operator(s):	entity to be asset or certified Address (Street/City/S	inte/Zip Cor		Telephona Number							
Delmar Gardens of O'Pallon, L.L.C.	101 South Hanley St. Louis Mo.631105			314-862-0045							
3. Ownership கண்டி	рік <del>овій сп</del> тадосу <del>ў</del>										
Nonprofit Corporat		City County	☐ Dist	rict							
4. Certification:	<b>—</b> ++- <b>/ —</b>			···							
	spplication, the applicant unders	tands tha	<u>:</u>								
application;	a made as to the community need for	-		]							
consider all simil	mmunity need, the Missouri Healt ar beds or equipment within the pr	opased se	rvice area:	,							
Rules and CON s			•								
project six (6) mo	ubject to forfeiture for fallure to inc nths after the date of issuance, uni	ur an exp less obliga	enditure on an; red or extended	y approved I by the Committee for							
an additional six (E) Notification will b	<ul><li>(6) months;</li><li>e provided to the CON Program sta may not be transferred, relocated,</li></ul>	all if and v	hen the projec	t is abandoned; and							
	i and data in this application as ac itative's signature below:	curate to	the best of our	knowledge							
	·										
	Ct Person (Seach a Contact Person Correc		ferent from the Lauer o	F Internal							
Name of Control Posters  J. David Bechsold		Attorney									
Telephene Humber	Fax Number	·	B-mail Address								
573-761-1116 September of Congay Pergap	573-634-7854		david.bechtold@ besidSgratus	Musch.com							
W/avil	Becklodd		October 5, 2004	<u> </u>							
MO-690-1661 (05-(40)	1										

STATE OF MISSOURI



# Matt Blunt Secretary of State CERTIFICATE OF AMENDMENT

WHEREAS,

Delmar Gardens of O'Fallon Real Estate, Inc. 00429140

Formerly,

#### DELMAR GARDENS OF O'FALLON, INC.

a corporation organized under The General and Business Corporation Law has delivered to me a Certificate of Amendment of its Articles of Incorporation and has in all respects complied with the requirements of law governing the Amendment of Articles of Incorporation under The General Business Corporation Law, and that the Articles of Incorporation of said corporation are amended in accordance therewith.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 23rd day of September, 2004.

latt Dlunt-



File Number: 200426821101 00426140 Date Filed: 09/23/2004 Matt Blunt Secretary of State

### AMENDMENT OF ARTICLES OF INCORPORATION

Pursuant to the provisions of The General and Business Corporation Law of Missouri, the undersigned Corporation certifies the following:

- The present name of the Corporation is: Delmar Gardens of O'Fallon, Inc. The name under which it was originally organized was: Delmar Gardens of St. Charles County, Inc.
- An amendment to the Corporation's Articles of Incorporation was adopted by the shareholders on September 21, 2004.
- Article Number One is amended to read as follows:

The name of the corporation is: Delmar Gardens of O'Fallon Real Estate, Inc.

 Of the five hundred (500) shares outstanding, five hundred (500) of such shares were entitled to vote on such amendment.

The number of outstanding shares of any class or series entitled to vote thereon as a class were as follows:

Class/Series

Number of Outstanding Shares

Common

500

5. The number of shares voted for and against the amendment was as follows:

Class

No. Voted For

No. Voted Against

Common

300

-0-

6. If the amendment changed the number or par value of authorized shares having a par value, the amount in dollars of authorized shares having a par value as changed is: N/A

If the amendment changed the number of authorized shares without par value, the authorized number of shares without par value as changed and the consideration proposed to be received for such increased authorized shares without par value as are to be presently issued are: K/A

7. If the amendment provides for an exchange, reclassification, or cancellation of issued shares, or a reduction of the number of authorized shares of any class below the number of issued shares of that class, the following is a statement of the manner in which such reduction shall be effected: N/A

FAST\_LOUISIAANDSLUQUITHISSECOTAM

IN AFFIRMATION THEREOF, the facts stated above are true. (The undersigned understands that false statements made in this filing are subject to the penalties provided under Section 578.000, RSHo)

Authorized Signature

Cabe Grossberg Printed Name President April 4

PAST\_LOUBSPANIOSLINGMIN (\$60397,61

STATE OF MISSOURV



Matt Blunt Secretary of State

CERTIFICATE OF ORGANIZATION

WHEREAS.

#### DELMAR GARDENS OF O'FALLON, L.L.C. LC0612589

filed its Articles of Organization with this office on the 24th day of September, 2004, and that filing was found to conform to the Missouri Limited Liability Company Act.

NOW, THEREFORE, I, MATT BLUNT, Secretary of State of the State of Missouri, do by virtue of the authority vested in me by law, do certify and declare that on the 24th day of September, 2004, the above entity is a Limited Liability Company, organized in this state and entitled to any rights granted to Limited Liability Companies.

IN TESTIMONY WHEREOF, I have set my hand and imprinted the GREAT SEAL of the State of Missouri, on this, the 24th day of September, 2004.

Secretary of State



File Number: 200426812106 LC0612589 Oate Filed: 09/24/2004 Matt Blunt Secretary of State

# ARTICLES OF ORGANIZATION

Œ

# DRIMAR GARDENS OF O'FALLON, L.L.C.

1.	The name of th	e limite	ed liability company is: I	Delmar	Quidens of O'Pallon, L.	L.C.
2. lawful "Mise	The purpose for business for whour! Limited List	ách a l	imited liability company	ompan y may l	y is organized is to tran se organized under and p	sact any or all pursuant to the
). Huseh	The name and Registered Ago	eddress nt, Inc.,	of the limited liability of 235 E. High Street, Jeff	(Submitte	y's registered agent in M City, Missouri 65101.	issouri is:
4.	The manageme	ent of t	se limited liability comp	any is v	vested in one or more ma	magers.
		<u>x</u>	Yes		No	
5.	The duration o	f the li	nited liability company	shall b	e perpetual.	
6.	The name and	addres	es ore rexinegro ed: to e	follow	9;	
Мали	ı		Street		City and State	
Gebo	Grossberg	101 \$	outh Hanley, Suite 1800		St. Louis, MO 63105	
7.	For tax purpos	ea, is t	he limited Hability comp	any co	usidered a corporation?	
		_x_	Yes	_	No	•
(F)	FFIRMATION I undersigned un- land under Section land under Section land under Section	derstan	OF, the facts stated above ds that false statements 049, RSIMo)	re ene fi made :	nie and correct. in this filing are subject  Cabe Grossberg  Printed Name	to the penaltica  9/34/of Date
			_		State of Missouri Credion - LLCAP 7 Prof	
					wantana marii ini ini ini ini	

FAST\_LOUIS/AANDSLAGATIV1880401.01

#### E. OTHER BUSINESS

#### Item #2

#3485 HM: Nuclear Imaging Services, LLC

St. Joseph (Buchanan Co.), Clinton (Henry Co.), Sedalia (Pettis Co.), Excelsior Springs (Clay Co.), Cameron (Clinton Co.), Richmond Ray Co.) and Jefferson City (Cole Co.)

\$1,450,000, Reissue CON to add Capital Region Medical Center,

Jefferson City (Cole Co.)

Contact Person: Suzanne L. Perkins, 608-663-6080

On August 12, 2003, a Certificate of Need (CON) was issued for project #3485 HS to Nuclear Imaging Services, LLC, Northern Shared Medical Services, Heartland Regional Medical Center, Golden Valley Memorial Hospital and Bothwell Regional Health Center to **establish** a mobile positron emission tomography (PET) service in St. Joseph, Sedalia and Clinton.

This unit was upgraded in early 2004 to an integrated PET/CT via non-applicability letter #3568 HA.

On December 1, 2003, the CON was reissued to add Excelsior Springs Medical Center as a service site.

On February 9, 2004, the CON was re-issued to add Cameron Regional Medical Center and Ray County Memorial Hospital as service sites.

On September 13, 2004, the CON was re-issued to add St. Mary's Health Center as a service site.

The applicants now propose to add Captial Region Radiation Therapy and Imaging Center (formerly Mid-Missouri Medical Foundation), 3400 Truman Boulevard, Jefferson City, MO 65109 as a service site. This freestanding location is owned and operated by Capital Region Medical Center. They propose to provide services one-half day per week at the proposed new service site (equivalent to 8% of a full-time service). This unit would replace a mobile PET unit which was discontinued in October 2004 (see attached "emergency" letter).

The applicants stated that the "geographic service area" for Capital Region Medical Center consists of Cole, Osage, Miller, Moniteau, Callaway, Maries, Morgan, Gasconade and Camden Counties. The 2005 projected population for this area is 248,232.

The population-based need formula was utilized for the "geographic service area" as shown below:

Unmet Need =  $(S \times P) - U$ 

where: S = Service-specific need rate of one PET unit per 500,000

population

P = Year 2005 population in the service area

U = Number of PET units in the geographic service area

Unmet Need =  $1/500,000 \times 248,232 - 0.16 = 0.34$  units needed

#### E. OTHER BUSINESS

Based on the need methodology in the Committee's Rules, a **need was documented** for Capital Region Medical Center.

For Capital Region Medical Center, the average patient charges per PET scan for the first three years are estimated at \$2551, \$2672 and \$2672, respectively. They appear reasonable when compared to other recent applications. In addition, it is estimated that the physician reading charges for the first three years would be \$300, \$320 and \$325, respectively.

Projected utilization for the new service site for 2004 through 2007 is estimated at 185 scans, 250 scans, 360 scans, and 416 scans, respectively.

If approved, the proposed route (see map on page 3) would be as follows:

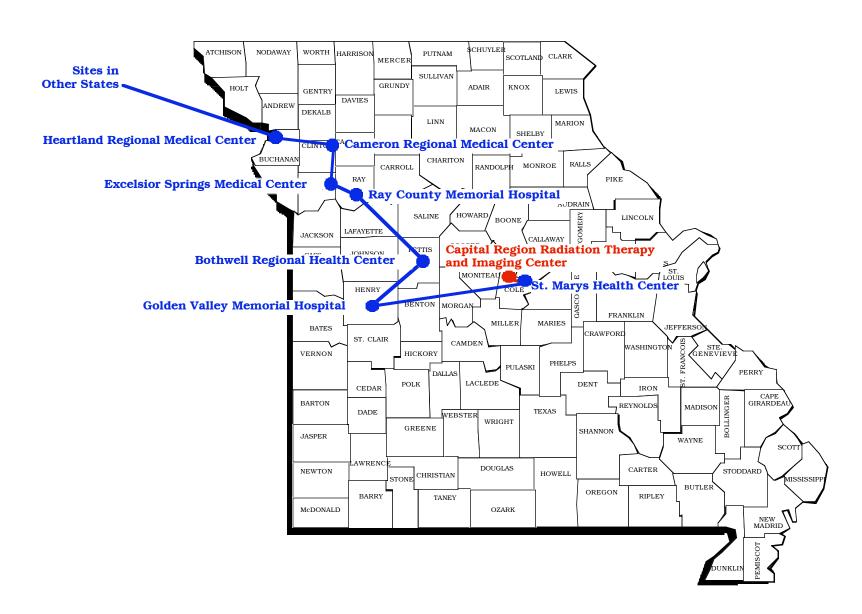
- Heartland Regional Medical Center, 5325 Faraon Street, St. Joseph 64506 (one day each week);
- Golden Valley Memorial Hospital, 1600 North Second Street, Clinton 64735 (one half day each week);
- Bothwell Regional Health Center, 601 East 14th Street, Sedalia 65301 (one half day each week);
- Excelsior Springs Medical Center, 1700 Rainbow Blvd., Excelsior Springs 64024 (one half day every other week);
- Cameron Regional Medical Center, 1600 E. Evergreen St., Cameron 64429 (one half day every other week);
- Ray County Memorial Hospital, 904 Wollard Blvd., Richmond 64085 (one half day every other week);
- St. Mary's Health Center, 100 St. Mary's Medical Plaza, Jefferson City 65101 (one half day each week);
- · Capital Region Medical Center, 3400 Truman Boulevard, Jefferson City 65109; and
- Out-of-state facilities (two-and-a-half days each week).

The applicants provided the appropriate replacement forms to reflect the change to the CON (included in this mailing). In addition, the information provided by the applicants included two letters of support from health care professionals.

MEH: October 12, 2004

# E. OTHER BUSINESS (cont'd.)

# #3485 HM: Nuclear Imaging Services, LLC





P.O. Box 1128 Jefferson City, MO 65102-1128 Phone: 573-632-5000

www.crmc.org

October 7, 2004

CERTIFICATE OF NEED PROGRAM

OCT 1 2 2004

RECEIVED

Thomas R. Piper, Director Certificate of Need Program Missouri Health Facilities Review Committee 915G Leslie Blvd Jefferson City, MO 65101

Re: Emergency PET/CT Mobile Services

Dear Mr. Piper:

I am writing to you regarding an emergency situation at our facility that requires us to go outside of the traditional guidelines of Missouri Certificate of Need process.

Our current provider of mobile PET services, Dakota Medical Services (DMS) is unable to fulfill their service agreement with our facility. We have numerous patients scheduled for PET studies to determine if they have cancer, if their cancer has spread or has reoccurred. We will not have the ability to perform these needed tests for the physicians in an effort for them to design a treatment program without this vital diagnostic imaging tool.

We have entered into an agreement with Northern Shared Medical Services (SMS) and are scheduled for the November 8<sup>th</sup>, 2004 CON hearing. However, in light of recent events and this unavoidable emergency, we need services from October 18<sup>th</sup>-November 8<sup>th</sup> until the CON is heard. We plan to use SMS' services for the interim period until the CON is heard at the November meeting.

Please accept our apologies in advance and we look forward to the presentation of the CON request at next month's meeting.

Sincerely,

Janet Weckenborg

Vice-President, Quality/Clinical Services

It's your choice.

# End of Certificate of Need Meeting Compendium

# Missouri Health Facilities Review Committee

# Administrative Meeting Compendium



# November 7-8, 2004

CON Program Office and State Capitol Building CON Conf. Rm. and House Hrg. Rm. 7

Jefferson City, MO

# Missouri Health Facilities Review Committee Dinner and Administrative Meeting

Sunday Evening, November 7, 2004, 6:00 p.m. – 9:00 p.m. Conference Room, Certificate of Need Program, Jefferson City

# **Tentative Agenda**

	<u>Discussion Topics*</u>	Action Requested
	Opening Topics  1. Perfection of Administrative Agenda (TP) <sup>1</sup>	
В.	Legal Counsel Report  1. Litigation Issues (DH)	_
C.	Regular Activities	
	<ol> <li>Report of Non-Applicability Letters Issued (MH)<sup>1</sup></li> <li>Expedited Review Decisions (TP)</li> </ol>	Approve
	<ul> <li>a. September 23, 2004, Expedited Decisions<sup>1</sup></li> <li>b. October 25, 2004, Expedited Decisions</li> <li>3. Tentative Agendas (TP)</li> </ul>	
	a. November 22, 2004, Expedited Ballot <sup>1</sup> b. January 24, 2005 CON Agenda	
	4. Meeting Calendars Review (TP)  2005 Proposed Meeting Calendar <sup>1</sup>	Approve
D.	Specific Management Issues	
	1. Rules and Practices (TP)	ъ.
	<ul><li>a. Non-applicability Issues</li><li>b. Hospital, PET and Other Review Criteria</li></ul>	
	2. 2005 Legislative Issues (TP)	_
	a. Priority Issues for the Committeeb. Concerns of Business	
	—— Administrative Agenda to be continued on Mon	day ——
	3. CON Program Agency Activities (TP)	
	a. Annual Work Plan b. Performance Evaluations	
	4. Other (TP)  a. Committee Member Recognition  b. Attendee Comments	
	<sup>1</sup> Mailed: October 19, 2004 Upda	ated: October 15, 2004

This is an Open Meeting and the public is welcome to attend. Individuals may speak only if called upon by a Committee member.

\*Closed session(s) will be held in accordance with \$610.021 RSMo for purposes of discussing legal or personnel issues at any time during this agenda.

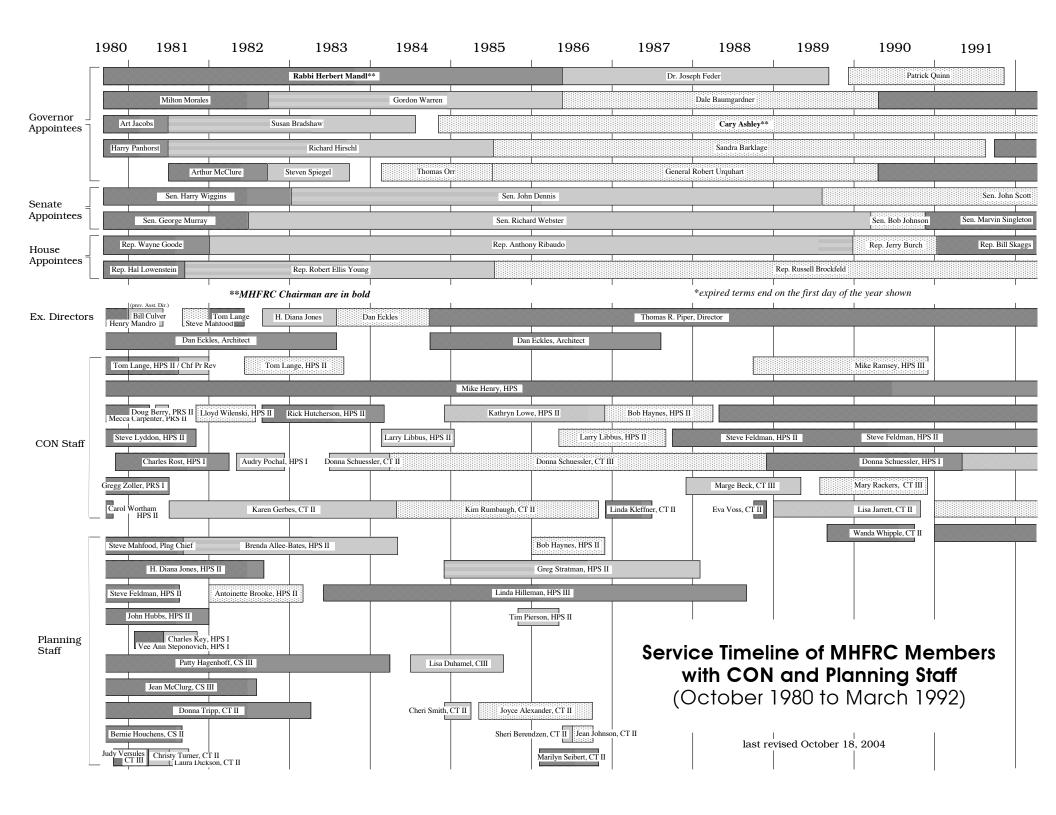
# **Suggested Motions**

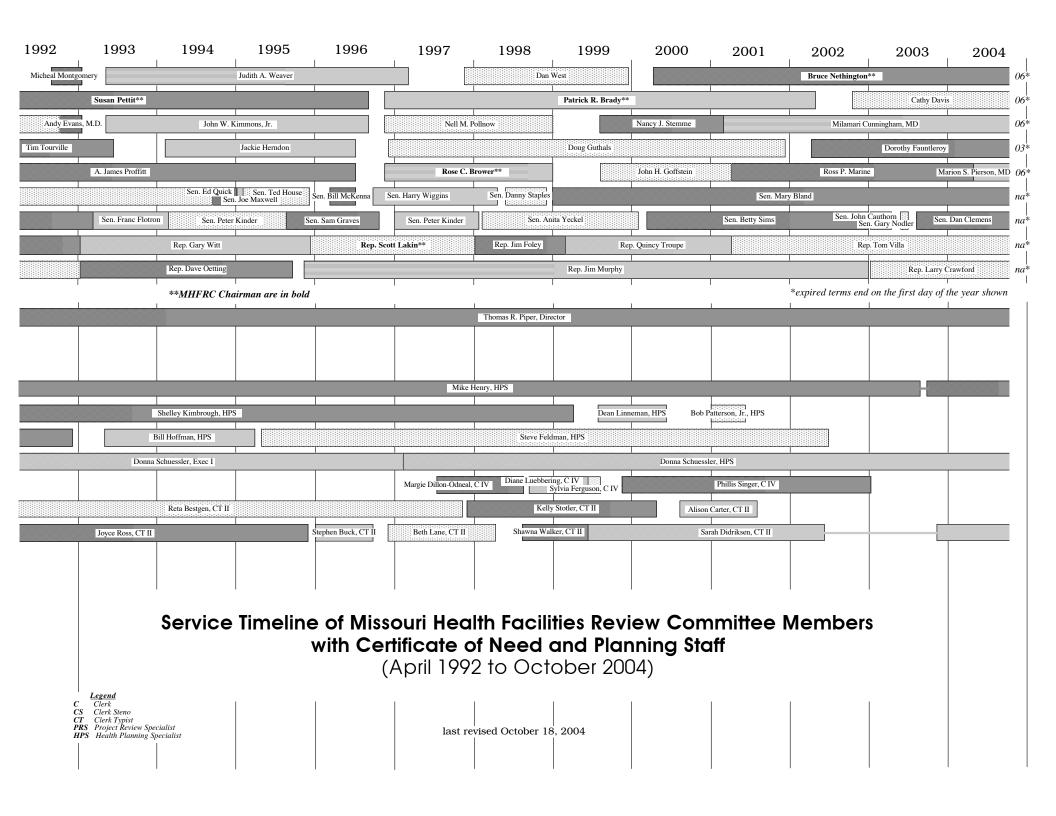
#### I. Motions for Action on Applications

A.	Approve as Submitted:
	I move we certify a need for project# as set forth in the application.
В.	Approve for Less:
	I move we certify a need for less than what was originally sought in project # by granting approval for all portions except the which would be reduced from to
C.	Denial:
	I move we refuse to certify a need project # for the reasons set forth as follows (list reasons):

#### II. Motions to Close Meeting (Closed Session)

- **A.** I move that this meeting be closed, and that all records and votes, to the extent permitted by law, pertaining to and/or resulting from this closed meeting be closed under Section 610.021 (choose one of the following):
  - 1. Subsection (1) RSMo for the purpose of discussing general legal actions, causes of action or litigation, and any confidential or privileged communications between this agency and its attorney.
  - 2. Subsection (3) RSMo for the purpose of discussing hiring, firing, disciplining or promoting an employee of this agency.
  - 3. Subsection (13) RSMo for the purpose of making **performance** ratings pertaining to individual employees.
  - 4. For the purpose of **reviewing and approving the closed minutes of one or more previous meetings** and which authorized this agency to go into closed session during those meetings.
  - 5. Subsection (14) and Section 620.010.14, Subsection (7) RSMo for the purpose of discussing investigative reports and/or complaints and/or audits and/or other information pertaining to a licensee or applicant.
- **B.** I move that this closed meeting be adjourned and that we return to Open Session.





#### Committee confirmation of Non-Applicability CON Letters Issued for period August 17, 2004 - October 14, 2004 (sorted by "Issue Date")

	Project Informati	on			ription	Dates	Decision	Applicant
Number	Name Address City Zip			Proposed Activity County	Original Proj Cost	LOI Rec'd Test Verifie	Issue Date d Decision	Name Phone No.
3687RA	Parkview Residential Care 26 Mississippi	Crystal City	63019	Add 4 RCF I beds Jefferson	\$0	08/18/04 08/18/04	08/18/04 Not Applicable	Philippe Jean-Baptiste 636-933-4714
3687RA	Parkview Residential Care 26 Mississippi	Crystal City	63019	Add 4 RCF I beds Jefferson		08/18/04 08/18/04	08/18/04 Not Applicable	Debra Hanneman 636-933-4714
3687RA	Parkview Residential Care 26 Mississippi	Crystal City	63019	Add 4 RCF I beds Jefferson		08/18/04 08/18/04	08/18/04 Not Applicable	DMP Enterprises, Inc. 636-933-4714
3688RA	Pineview Heights Resident 515 Garst	ial Care Cabool	65689	Establish 8-bed RCF II Texas	\$581,025	08/25/04 09/01/04	09/01/04 Not Applicable	Kabul Nursing Homes, Inc. 417-962-3713
3689НА	Insight Health Corp. Two sites	Two sites		Establish mobile PET ro	sute \$829,275	09/01/04 09/10/04	09/10/04 Not Applicable	Insight Health Corp. 949-282-6135
3689НА	Insight Health Corp. Two sites	Two sites		Establish mobile PET ro	oute	09/01/04 09/10/04	09/10/04 Not Applicable	Lester E. Cox Medical Center 417-269-9000
3689НА	Insight Health Corp. Two sites	Two sites		Establish mobile PET ro	oute	09/01/04 09/10/04	09/10/04 Not Applicable	Lake Regional Health System 573-348-8000
3690FA	Branson Heart Center 515 Bee Creek Rd.	Branson	65616	Acquire cardiac cath equ Taney	uipment \$517,874	09/01/04 09/10/04	09/10/04 Not Applicable	Branson Heart Center, PC 417-336-4112
3691NA	Bethesda Southgate Alzhei 5943 Telegraph Rd.	mer's Special Ca Oakville	re Unit 63129		it \$746,615	09/01/04 09/10/04	09/10/04 Not Applicable	Bethesda Long Term Care, Inc. 314-800-1900
3692FA	St. John's Clinic–Rolla 1100 W. 10th St.	Rolla	65401	Acquire MRI Phelps	\$748,000	09/09/04 09/10/04	09/10/04 Not Applicable	St. John's Health System 417-820-2000
3693FA	Orthopaedic Specialists of 3045 S. National	Springfield, PC Springfield	65804	Acquire MRI Greene	\$993,910	09/15/04 09/22/04	09/22/04 Not Applicable	Orthopaedic Specialists of Springfield 417-882-1900
3694RA	Victorian Manor of Herman 2093 Village Lane	nn Hermann	65041	Establish 48-bed RCF I Gasconade	\$590,000	09/16/04 09/22/04	09/22/04 Not Applicable	Johnpaul and Nancy Quick 573-859-3486
3694RA	Victorian Manor of Herman 2093 Village Lane	nn Hermann	65041	Establish 48-bed RCF I Gasconade		09/16/04 09/22/04	09/22/04 Not Applicable	Victorian Manor of Hermann 573-859-3486

#### Committee confirmation of Non-Applicability CON Letters Issued for period August 17, 2004 - October 14, 2004 (sorted by "Issue Date")

	Project Information	on		Desci	ription	Dates	Decision	Applicant
Number	Name Address City Zip			Proposed Activity County	Original Proj Cost	LOI Rec'd Test Verifie	Issue Date d Decision	Name Phone No.
3698RA	Winchester Place Residentia Winchester and Bowman		63822	Establish 26-bed RCF II Stoddard	\$564,807	09/27/04 09/29/04	09/29/04 Not Applicable	Norman B. and Billie J. Harty 573-624-4645
3698RA	Winchester Place Residentia Winchester and Bowman		63822	Establish 26-bed RCF II Stoddard		09/27/04 09/29/04	09/29/04 Not Applicable	Winchester Place, LLC 573-624-4645
3700RA	Butterfield Residential Care 1120 N. Butterfield Rd.	e II Bolivar	65613	Add 6 RCF II beds Polk	\$448,021	10/04/04 10/06/04	10/06/04 Not Applicable	CMH Foundation, Inc. 417-326-6000
3707RA	Country Oak Village 101 Cross Creek Dr.	Grain Valley	64029	Establish 32-bed RCF I Jackson	\$596,000	10/08/04 10/13/04	10/13/04 Not Applicable	SWBG Development, LLC 573-474-3141

# Missouri Health Facilities Review Committee Expedited Ballot Decisions September 23, 2004

1. **#3665 HS:** Lester E. Cox Medical Centers Springfield (Greene County) \$1,765,000, Replace linear accelerator Approved

2. **#3667 HS:** St. John's Health System Springfield (Greene County) \$2,399,000, Replace PET unit

Approved

# Missouri Health Facilities Review Committee Expedited Applications for November 22, 2004, Decisions

# Mail Ballot Agenda

New Business: Expedited applications

TOU DUDINGS DIPONION OF	
Application Project Number & Name / Cit	ry ly Country/Cost ly Dosorintion
Application Project Number & Name/Cit	y a county/cost a Description
- * *	• • • • • • • • • • • • • • • • • • • •

09/30/04 1. **#3639 RS:** Beth Haven Residential Care Facility Hannibal (Marion) \$3,359,855, Replace 35-RCF II

Filing Date/Reviewer

10/08/04 2. **#3637 NP:** Meramec Bluffs Skilled Nursing Ballwin (St. Louis County) \$11,867,565, LTC bed expansion of 60 SNF beds

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Febru 1 8 15 22 29 March	9 23	3 10 17 24	4 11 18 25	5 12 19 26	6 13 20 27	7 14 21 28
7 14 21 28	1 8 15 29	2 9 16 23 30	3 10 17 24 31	4 11 18 25	5 12 19 26	6 13 20 27
<b>April</b> 4 11 18 25	5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30	3 10 17 24
2 9 16 23 30	3 10 24 31	4 11 18 25	5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29
June 6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30	3 10 17 24	4 11 18 25	5 12 19 26
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# Approved 2004 MHFRC Meeting Calendar

#### **Certificate of Need & Administrative Meetings**

February 9	Jefferson City
March 29	Jefferson City
May 24	Jefferson City
July 19	Jefferson City
September 13	Jefferson City
November 8	Jefferson City
January 24, 2005	Jefferson City

#### **Legislative Workshop**

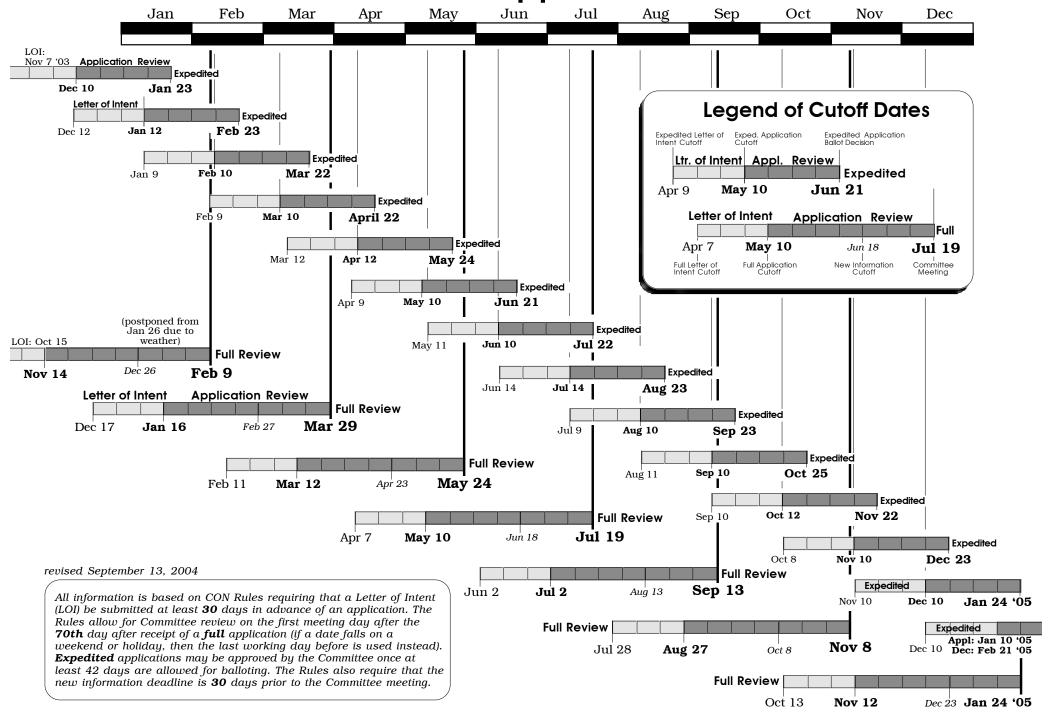
November 7.....Jefferson City

	Administrative Meetings						
0	CON Meetings						
	Committee Workshop						
	Round Table Meetings (state agencies info exchange)						



approval date: September 13, 2004

# 2004 Letter of Intent and Application Review Calendar



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Marcl 6 13 20 27	7 21 21 20	1 8 15 22 29	2 9 16 23 30	3 10 17 24 31	4 11 18 25	5 12 19 26
April 3 10 17 24	4 11 18 25	5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30
May 1 8 15 22 29	2 9 23	3 10 17 24 31	4 11 18 25	5 12 19 26	6 13 20 27	7 14 21 28
June 5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30	3 10 17 24	4 11 18 25
<b>July</b> 3 10 17 24 31	11 18	5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30
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Decer  4  11  18  25	5 12 19 26	6 13 20 27	7 14 21 28	1 8 15 22 29	2 9 16 23 30	3 10 17 24 31

# Proposed 2005 MHFRC Meeting Calendar

#### **Certificate of Need & Administrative Meetings**

January 24	Jefferson City
March 21	Jefferson City
May 23	Jefferson City
July 18	Jefferson City
September 19	Jefferson City
November 21	Jefferson City
January 23, 2006	Jefferson City

#### **Legislative Workshop**

October 10Jefferson	Cit
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0	CON/Admin. Meetings
	Committee Workshop
	Round Table Meetings (state agencies info exchange)



approval date: August 23, 2004

# End of Administrative Meeting Compendium